



PARENT EMERGENCY CONTACT FORM 2009

If you will be out of town while your child is at camp, please provide us with the following information:

Camper's Name: _____

Village: _____

Program: Mini A Session 1 Super Season TSS/Hadracha
 Mini B Session 2 Agree Kennedy

Parent(s) Name _____

I/We will be out of town between _____ and _____ and can be reached at the following telephone number in case of emergency.

Phone Number: _____

In case I/we cannot be reached, please contact

_____ at _____
(Relationship) (Phone Number)

Please pdf, mail or fax this form **before June 8th**: tamarack@tamarackcamps.com
Tamarack Camps
6735 Telegraph Road #380
Bloomfield Hills, MI 48301
Fax: 248-647-1493

After June 8th, please pdf, mail or fax this form: tamarack@tamarackcamps.com
Tamarack Camps
4361 Perryville Rd
Ortonville, MI 48462
Fax: 248-627-4576