the Columbia Museum of ART

Check-in & Check-out Authorization Form

My student is registered for: _____

Student Name: _____

Birth Date: _____

☐ ***My student will be driving,*** and I authorize them to sign their self out of camp.

☐ ***My student will not be driving,*** and I do not authorize them to sign themselves out of camp.

☐ ***My student will not be driving*** but can sign themselves out and leave the museum at check-out.

Signature: _____

Printed Name: _____ Date: _____