



# Camp Helen Brachman - Pick-Up Authorization & 2017 Voluntary Self I.D.

Please provide the names of people who are authorized to pick-up your child.

Name of Camper: \_\_\_\_\_

Adults you authorize to pick up your child at the end of camp.

	Parent/Guardian Names	Cell & Home Phone	Work Phone	Relationship to Camper
1		Cell: Hm:		
2		Cell: Hm:		

	Other Adult Names	Cell & Home Phone	Work Phone	Relationship to Camper
1		Cell: Hm:		
2		Cell: Hm:		

Parent's/Guardian's name: (print) \_\_\_\_\_

Parent's/Guardian's signature: \_\_\_\_\_

Date: \_\_\_\_\_

DO NOT COMPLETE - FOR DAY OF RETURN USE ONLY: Name of adult picking up camper: \_\_\_\_\_

Signature: \_\_\_\_\_

## Voluntary Self-Identification of Disability and Limited English Proficiency for Participants

COA Youth & Family Centers is committed to providing equal program opportunity to all those interested in our programs. We invite you to complete this form so that we can better serve you and all our participants.

This information allows COA to evaluate equal program opportunity and affirmative action efforts and to comply with Wisconsin state law. The information is maintained so that data about participants' characteristics can be compiled and analyzed.

Completion of this form is **completely voluntary**. The information provided will be kept confidential.

1. Are you a person with a disability, as defined by the Americans with Disabilities Act (ADA) of 1990 or the Wisconsin Fair Employment Act? Yes  No  Do you require accommodation? Yes  No

If yes, what kind? \_\_\_\_\_

*Verification is not required unless a reasonable accommodation is requested.*

2. Do you have a limited ability to read, write, speak or understand English? Yes  No   
Do you have written or verbal translation needs? Yes  No  If yes, what kind and in what language? \_\_\_\_\_

If you have any questions about the Voluntary Self-Identification form, please contact the Equal Opportunity Coordinator, Julie Hoffman, Monday through Friday from 8:30 a.m. to 5:00 p.m. via telephone at (414) 263-8383, ext. 1112 or at 909 E. North Ave., Milwaukee, 53212.