

## Personal Care Attendant (PCA) Permissions

The PCA also needs to fill out a Volunteer Application Form, a Background Check Disclosure Form, and pay the \$100 volunteer fee.

Camper's Name: \_\_\_\_\_

PCA's Name: \_\_\_\_\_

Relationship between PCA & Camper: \_\_\_\_\_

- I give permission for my child (camper listed above) and this adult (PCA listed above) to be alone at times when my child needs a sensory break.

Where my camper should sleep:

- In the counseling group's cabin – my child will do fine sleeping in a cabin without direct adult supervision with up to 7 other campers.

Or

- Alone with the PCA – my child will need the quiet, sensory break to get a good night's sleep to be able to function and have a good experience the next day
  - I give permission for my child (camper listed above) to sleep in the same room with their PCA (listed above).

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Parent's Signature and Date

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Parent's Printed name