

BOYS STATE CITY \_\_\_\_\_

Check Appropriate Response:  Arriving Late     Departing Early

Arrival/Departure Day and Approximate Time: \_\_\_\_\_

Student Name: \_\_\_\_\_

Reason for Late Arrival/Early Departure:

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Medicine Picked Up:  Yes

Room Key Collected:  Yes

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

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