

Camper Registration Form

Please print clearly and fill in all areas

Day campers generally come

Name: _____

Mailing Address: _____ Phone: _____

Age: _____ Birthday (DD/MM/YY): _____

Gender: Male Female Email Address: _____

Alternate contact name and Phone number: _____

Camp #: _____ Dates requested: _____

Name of Physician: _____ Hospitalization Number: _____

Date of last tetanus shot: _____ Chronic Conditions (check all that apply):

- | | | | |
|--|-------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Allergies | <input type="checkbox"/> Asthma | <input type="checkbox"/> Bedwetting | <input type="checkbox"/> Epilepsy |
| <input type="checkbox"/> Heart Ailment | <input type="checkbox"/> ADD/ADHD | <input type="checkbox"/> Illness | <input type="checkbox"/> Diabetic |
| <input type="checkbox"/> Hay Fever | <input type="checkbox"/> Nightmares | <input type="checkbox"/> Sleepwalking | <input type="checkbox"/> Other (describe below) |

Other: _____

Camp Tapawingo staffing does not enable us to provide for all special circumstances.

Therefore we reserve the right to refuse campers whose medical or supervisory care is beyond our ability to meet. All campers and parents must report to the medical person at camp to ensure we have all current information about the camper.

Please complete the Registration Form and submit payment to:

Registrar
Camp Tapawingo
Box 194
Prince Albert, SK
S6V 5R5

A minimum non-refundable payment of \$30.00 is required with the registration form.

Full payment can be made with registration form by mail or at camp.

Make all cheques payable to CAMP TAPAWINGO Note: There is a \$25.00 charge for N.S.F. cheques

- I give my permission for any photographs or videos of camp activities which may include all names listed on this registration form to be used in camp promotional materials, brochures and websites.

Waiver and Release of Liability and Indemnity Agreement

In CONSIDERATION of the camper's being permitted to participate in the camp operated by Camp Tapawingo Committee (herein "The camp")

1. I, _____ (print name of Parent/Guardian), for myself, the camper, _____ (print name of camper), my spouse, the camper's heirs, personal representatives, and assigns, hereby release, discharge and agree to hold harmless and indemnify the camp, its officers, directors, managers, counsellors and any and all of its personnel of any from all liability, loss, damage, or injury to person or property in any way resulting from or arising in connection with or related to the camper's participation at the camp. It is fully understood that this means that the camp cannot be sued if any personal injury is suffered during the camp or if any property is damaged, lost, or stolen while the camper is at camp.
2. FURTHERMORE, I, on behalf of the camper, as well as for myself hereby undertake to indemnify the camp against any and all liability, loss or damage from which the camp may be found liable as a result of claims, demands or judgments against the camp arising from any act or failure to act on the part of the camper during the course of the camp, for which act or failure to act either I or the camper may be found liable at law. It is fully understood that this means that if a camper causes injury to another person or damages another person's property while at the camp, and the camp has to pay an amount to that person, the camp can recover the paid from me.

I HEARBY DECLARE THAT I HAVE READ THIS RELEASE AND INDEMNITY AGREEMENT AND ACCEPT THE SAME IN FULL ON BEHALF OF MYSELF, MY SPOUSE, THE CAMPER, THE CAMPER'S HEIRS, PERSONAL REPRESENTATIVES AND ASSIGNS.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____