

Ukrainian Youth Association Werchowyna Camp Registration

July 14th to July 28th 2019



CAMPER INFORMATION (IN ENGLISH)

Child's First Name	_____	Last Name	_____
		Date of Birth (mm/dd/yyyy)	_____
Street Address	_____	Sex	_____
City	_____	Grade Completed	_____
Province/State	_____	Home Phone	_____
Postal/Zip Code	_____	Work Phone	_____
Country	_____	Emergency Contact/Phone	_____
CYM Branch	_____	Parent's e-mail	_____
Speaks Ukrainian:	_____	T-Shirt Size:	_____

ДАННІ ПРО ТАБОРОВИКА

Ім'я таборовика _____ Прізвище таборовика _____

CAMP REGISTRATION SECTION

<input type="checkbox"/>	Vykhovno-Vidpochynkovyj	<input type="checkbox"/>	1 week	<input type="checkbox"/>	2 weeks
<input type="checkbox"/>	Sumeniata	<input type="checkbox"/>	1 week	<input type="checkbox"/>	2 weeks

I, the undersigned parent/guardian, assume full responsibility for payment of all camp fees, related expenses and all medical expenses incurred by my child. I understand that camp fees and registration costs are not refundable.

I understand that I am liable for all costs related to, but not limited to, damages caused by my child, or for additional costs incurred by the UYA as a result of my child's actions, be they intentional or unintentional (e.g. telephone, damages, kiosk, etc.) I give the UYA the right and permission to copyright, and/or use, and/or publish photographic portraits, pictures or likenesses of my child depicted during his/her stay at camp, throughout any media, including, but not limited to newspapers and/or the Internet and, for art, advertising or any other lawful purpose.

Further more, I understand that for unbecoming conduct my child can be expelled from camp, without reimbursement of cost, at the absolute discretion of the management and/or Camp Komendant.

My child has been made aware of the rules and regulations of the UYA Camp at Werchowyna in Chertsey, Québec and both my child and I agree to abide by them.

I hereby give permission for my child to participate in field trips planned during camp.

I hereby give permission for my child to participate in the air rifle activity planned during the camp with the understanding that this event will be conducted under the strict supervision of a qualified instructor only after participating and attending a mandatory safety course.

Parent/Legal Guardian First Name: _____ Last Name: _____
Signature of Parent/Legal Gaurdian: _____
Date (mm/dd/yyyy) _____

\$100 DEPOSIT & PAYMENT MUST BE RECEIVED NO LATER THAN May 31st 2019

Camp Costs:	_____	Deposit Received:	_____
Less Discount:	_____	Balance due:	_____
Actual Cost:	_____	Cheque #:	_____