

# Ukrainian Park Catholic Children's Camp Registration Form 2018

**OFFICE USE ONLY**

Date Received:  
Payment Amount:  
Cheque #:

Last Name:	First Name:	
Address:	City:	
Postal Code:	Birthdate:	
Circle One                      BOY                      GIRL	Home Phone:	
Parent(s)/Guardian(s):	Work Phone:	
	Cell Phone:	
	Email:	
<i>Emergency Contact                      (other than parent/guardian)</i>		
Name:	Phone:	Relation:
Parish/Church:	School:	
Grade:	Swimming Level:	Attended camp before?    YES    NO
T-Shirt Size	<b>Youth:</b> SM MED LG	Bringing life jacket?    YES    NO
Cabin Mate preference: 1. 2.	YES    NO	
	Are you a new camper or did you refer a friend?    Name of friend(s):	

<i>Check Box</i>	<i>Camp Options</i>	<i>Cost of Camp</i>
<input type="checkbox"/>	Children's Camp #1 (July 1 - July 8, 2018) Grades 6-10 (completed as of June 30, 2018)	\$280.00
<input type="checkbox"/>	Children's Camp #2 (July 8 - July 15, 2018) Grades K-5 (completed as of June 30, 2018)	\$280.00

MB Health Registration Number: \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ (6 digit)

\_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ (9 digit)

Does your child take medications? If yes, please list.

Does your child have any difficulties which may require some program adaptations? (Learning/physical disabilities, etc.)

Does your child have any allergies? If yes, what triggers or causes reaction?

Does your child carry an ANA KIT? **YES**            **NO**

Does your child carry an EPI PEN? **YES**            **NO**

Are there any special dietary requirements? (Food allergies, vegetarian, etc.)

Family Physician name/number:

*If there are any other health issues or medical concerns that cannot be explained above, please attach a letter with your registration. If there are any specific problems that are confidential, please include a letter marked "Confidential" for the Camp Director.*

All medications are to be brought to the camp in their original container with the name of the camper, medication and dosage information clearly visible.

Please make cheques payable to Ukrainian Catholic Archeparchy. Postdate cheques to June 15, 2018.

**Registration is due by May 31, 2018. Late registrations will be charged a \$25.00 late fee.**

Please mail registration and cheque with full payment to:

*Children's Camp 2018*

*233 Scotia Street*

*Winnipeg, MB*

*R2V 1V7*