



2008 REGISTRATION FORM | Please complete one form per camper.
SUMMER CAMPS Register online @ www.iawah.com

Camp Session(s) Requested:
Camper Name:
Address:
City: Province:
Postal Code: Phone: ()
Camper Email:
Birth Date: dd / mm / yy
Grade: (as of fall 2008)
Male Female

Note: The Parents/Guardians listed below have exclusive access to the Named Camper's information.

Parent/Guardian 1:
Email:
Phone (h): () Phone (w): ()
(if different from camper:)
Address:
City:
Province: Postal Code:

Briefly describe any health conditions or social behaviours that may impact participation in Camp activities:

Parent/Guardian 2:
Email:
Phone (h): () Phone (w): ()
(if different from camper:)
Address:
City:
Province: Postal Code:

Cabin Mate requests - max. 3:
(All campers must make the request and be of the same age.)

First time at IAWAH Summer Camps:
No - last time attended was:
yes - I heard about IAWAH from Friend Church School Internet Advertising
Friend: Other:

COMMUNICATION OF INFORMATION
Preferred method of communication: Email Postal Mail
Information is normally sent to the Camper c/o the Parent/Guardian using the Parent contact information (emails will be sent to parent email when applicable).
By registering you are automatically included in all camper related mailings (brochures and promotion of IAWAH Camping Events throughout the year).
I would also like to receive the IAWAH Update quarterly newsletter.
Should you have any questions about IAWAH's Privacy Policy or would like to be removed from any mailing list please contact the Camp Office.

STATEMENT OF UNDERSTANDING
PRIVACY: Camp IAWAH will only use personal information collected for the purposes of IAWAH. Personal Information will not be given to any third party without acquiring consent.
DISMISSAL: Camp IAWAH reserves the right to dismiss the named Camper who, in the opinion of the Camp, is a hazard to the safety and rights of others, or appears to have rejected the reasonable controls of the Camp.
CUSTODY: The Parent/Guardian submitting this form has legal custody of the Named Camper. Conditions of custody, if applicable, are enclosed including a photocopy of the section of any court order referring to visitation rights.
PROMOTIONAL MATERIALS: Camp IAWAH and any third party authorized by IAWAH may use any photo, video, or recording of the Named Camper in IAWAH authorized materials. Campers will not be identified.
ACTIVITIES: Some Camp activities may occur off IAWAH Property and the Named Camper may fully participate in such activities.
LOST ITEMS: IAWAH is not responsible for personal items that are lost, stolen or damaged.
MEDICAL TREATMENT: Every Camper must have a valid health insurance (Ontario Health Insurance or equivalent). The Parent/Guardian gives permission for the physician and nurses selected by Camp IAWAH to assess and give medical treatment, including prescriptions, when necessary to the Named Camper. In the event that the Named Camper requires special medication, x-ray or other treatment beyond that which is available at Camp, the Parent/Guardian will be notified and is responsible for any transportation and medical care expense. In the event of surgical or medical emergency and the Parent/Guardian is not immediately available for consultation, Camp IAWAH has permission to secure proper treatment for the Named Camper. This treatment may or may not include hospitalization, injections, IV therapy, anaesthesia or surgery.
WAIVER: Every precaution is taken for the safety and good health of IAWAH campers. In the event of an accident or sickness, Camp IAWAH (known corporately as Christian Youth Centre Kingston) and its Camp Directors and Staff are hereby released from any liability.
DUTY TO INFORM: It is the responsibility of the Parent/Guardian to ensure that IAWAH is informed of any information that may be necessary for the safety and rights of the Named Camper as well as the safety and rights of all other campers and staff.

I have read and understood the above Statement of Understanding and agree to its terms and conditions:

Parent/Guardian Name: Signature: Date:

