

C.J.M SUNNYSIDE FAMILY CAMP REGISTRATION FORM

Name: _____ Age if under 20: _____
Address: _____ Completed Grade: _____
City: _____ Postal Code: _____ Phone #: _____
Male: _____ Female: _____ Health Care #: _____ Email Address: _____
Health concerns/allergies etc. requiring attention: _____
Prescription & non-prescription medication: _____
Parent/Guardian Contact Name: _____ Parent/Guardian Contact Phone #: _____

Preferred Language: English: _____ Japanese: _____
Full-Time: _____ Part-Time: _____ If part-time, what night(s) are accommodations required? S M T W Th F

ADULTS, please check off preferred accommodations:
Motel: _____ night(s) @ \$5.00/person/night _____
Lodge: _____ adults @ \$60.00/person/week (quad or double occupancy) _____
Dorm or Tent – NO CHARGE _____
Trailer hook-ups _____ night(s) @ \$2.00/night _____

Full-Time Camper Fees: _____
Full-Time Camper Family Discount (10% discount – Refer to Brochure): Yes _____
Part-Time Camper Fees: _____ Number of Days: _____
If you are receiving church subsidy, specify amount: _____
(A completed church subsidy form must be submitted together with the registration form) _____

TOTAL _____
Do you attend church regularly? If yes, name of church: _____
FOR CAMPERS FROM OUTSIDE CANADA (travel insurance information)
Ins. Co. Name: _____ Policy #: _____

CJM SUNNYSIDE FAMILY CAMP CAMPERS CONSENT FORM

We/I, the undersigned, as parents, guardians and/or participant, **by checking this box** , HEREBY ACKNOWLEDGE AND AGREE THAT in consideration of my child, ward or myself (all reference to as the "Applicant") being permitted to participate in the program of CJM Sunnyside Family Camp as well as related activities (all referred to as the "Program"):

I do hereby release CJM Sunnyside Family Camp, its members, officers, directors, agents, employees, volunteer staff and independent contractors, and clubs, associations, sponsoring churches or companies, other campers, participants in any portion of the Program, and all their respective agents, employees and representatives (all referred to as the "Releasees") involved in the Program or a portion thereof for or participation in the Program, notwithstanding that such losses may have been caused solely or partly by the negligence or gross negligence of the Releasees, or whosoever.

I understand that the Program may involve elements of danger, exposing the Applicant to many risks and hazards both of a man-made and natural origin, some of which are inherent in the nature of the Program itself, while others may result from unforeseeable and unforeseeable human error and negligence, and that as a result the Applicant may suffer serious personal injury, illness or death as well as property losses.

I nevertheless freely and voluntarily assume all risks and hazards connected with the Program whatsoever, including the risk of lack of legal recourse, and accordingly acknowledge and agree that the Applicant's preparation for and participation in the Program shall be entirely at my own risk.

I understand clearly that the Releasees are and shall be deemed to be acting both as agents on behalf of and for the benefit of each person defined as a Releasee herein for the purpose set out in this release.

I give consent to the Nurse to administer basic non-prescription medication as needed. Eg. Pain reliever.

This Release, Waiver and Assumption of Risk is binding upon me, my heirs, executors, administrators, personal representatives and assigns. We, the undersigned, have read the Releases, Waiver and Assumption of Risk and understand that it has legal effect of removing all of our legal and equitable recourse against all the Releasees referred to herein and connected in any way with the Program.

Camper's/Applicant's Name Date

We/I hereby give consent to allow my child to attend Camp in agreement with the above conditions.

Parent or Guardian (Required for under-aged child) Date

APPLICATIONS ARE INCOMPLETE WITHOUT THE CONSENT CHECK BOX CHECKED!!

Email registration to:
cjmsunnyside@gmail.com
Or mail with payment to:
Marie Hasegawa
105 Scenic Cove Bay NW
Calgary, AB
T3L 1P7