

(registration continued)

Any allergies, medications or any other medical or behavioural info we should know?

T-Shirt Size: _____

Media/Promotion release:

Check this box if you DO NOT wish us to use photos of your child for camp promotional purposes such as brochures and our website

Waiver

I, _____ (print full name of parent/guardian) in consideration of my child _____ (full name of teen camper) (Hereinafter referred to as the "participant") release the Ukrainian Catholic Eparchy of Edmonton and the Ukrainian Catholic Episcopal Cooperation of Western Canada (hereinafter referred to as the "Releasees") and their representatives from all actions, claims and damages arising out of any incident whereby injury or damage may be sustained by the participant while the participant attends the Camp Oselia Teen Camp, facility, trip activity or program.

I give my consent to medical treatment and aid on behalf of the participant, including admission to any hospital or clinic if deemed advisable and this shall be sufficient authority to do so.

I hereby indemnify and hold harmless the Releasees against all actions, claims and damages which may be brought against the Releasee by or on behalf of the participant in respect off or arising out of any accident, injury or damage and against any loss arising therefrom.

Date: _____, 2013

Signature of parent/guardian

Registrations can either be emailed or mailed to:

oselia.camp@gmail.com

Or

9645 108 Avenue

Edmonton, AB

T5H 1A3

Please make all cheques payable to Camp Oselia



CAMP OSELIA TEEN CAMP SUMMER 2013

HEROES OF THE FAITH



CAMP INFORMATION

Who? - YOU! Teens ages 13-18

What? - Teen Summer Camp

When? - July 29th-August 2nd

(Drop off on Monday at 3pm, pick up on
Friday at 7pm)

**Where? - Camp Oselia of course!
Lake Wabamun**

Cost? - \$250 for the week

(includes all meals, transportation during camp
and all activities)

- 1. To have fun!!**
- 2. To learn about the Saints**
- 3. Join your friends in fellowship**

For more information, contact us on...

Email: oselia.camp@gmail.com

Phone: 780-424-5496/

**Check us out on Facebook on the
Edmonton Eparchy- Youth Ministry
page**

Teen Registration Form

Teen Info

First Name: _____

Last Name: _____

Gender: _____

Date of Birth: _____

Age as of July 29: _____

School: _____

Cell Phone: _____

*Cell phones are allowed at camp—limited use only.

Email: _____

Parent/Guardian Info

First Name: _____

Last Name: _____

Mailing Address: _____

City/Town: _____

Postal Code: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Faith Info

Denomination: _____

Parish Name: _____

Location of Parish: _____

Emergency Contact Person (not parent)

Full Name: _____

Relationship to teen: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Medical Info

Health Care #: _____

Other Insurance: _____

Family Doctor's Name: _____

Doctor's Phone Number: _____