

Plast Camp Novyi Sokil – Emergency Home Contact Form

Camper's name: _____

Home address: _____

D.O.B. _____ Height _____ Weight _____

Eye color _____ Hair color _____

Parent address during camp: _____

Attach
THIS SIZE
photograph
of
camper
here

	Mother's	Father's
Name		
Home phone		
Cell Phone		
Work phone		
Email		

In case of emergency, parents will be called first. If parents are unable to be contacted list in order of priority other people to be contacted.

1. Name: _____ Relationship to camper: _____

Home: _____ Cell: _____ Work: _____

2. Name: _____ Relationship to camper: _____

Home: _____ Cell: _____ Work: _____

3. Name: _____ Relationship to camper: _____

Home: _____ Cell: _____ Work: _____

If the above information should change, I will notify the camp immediately.

Parent/Guardian signature

date

Authorization for field trips

I am aware that the camp program may include several field trips and that these field trips may involve any or all of the following activities: crossing state boundaries, travel by charter bus or private car, swimming, and overnight stay outside of Novyi Sokil Plast Camp property. Understanding the above, I hereby give my child permission to participate in these field trips.

Parent/Guardian signature

date