**ADVENTURE CAMP REGISTRATION FORM**

**Please Note**: Submitting this application form represents acceptance of our Terms and Conditions, available on request. You must answer all questions and have both pages signed before we can register your child for a Camp.

**Date of Camp your child will attend**: Click here to enter a date. **Name of your child**: Click here to enter text. **Date of Birth**: Click here to enter a date. **Gender**: Male  Female

**Address**: Click here to enter text.

**Home Ph**: Click here to enter text. **Business Ph**: Click here to enter text. **Cell Ph**: Click here to enter text.

**Email address**: Click here to enter text. **School they attend**: Click here to enter text.

**Has your child attended Lakewood Lodge before**: Yes  No

**Emergency Contact Name**: Click here to enter text. **Emergency Ph**: Click here to enter text.

**Has your child any special requirements (e.g. asthma, allergies, bedwetting, diet, etc.) Please list:** Click here to enter text.

Please note: a separate form will be emailed to you after we receive this registration form to acquire all necessary details for managing any special requirements. Registration to the camp will not be confirmed until after we have received and assessed this additional form.

**Medication: Is your child taking regular medication?** Yes  No  **If Yes, please list each medication name and give the reason:** Click here to enter text.

**Do we have your permission to administer the above medication (including Panadol) to your child?** Yes  No

**Custody/Access/Protection Orders**: You confirm that the following people are authorised to collect/have access to your child:

1. Name: Click here to enter text. Phone No: Click here to enter text. Relationship to Child: Click here to enter text.
2. Name: Click here to enter text. Phone No: Click here to enter text. Relationship to Child: Click here to enter text.

**Your Child’s Ability and Experience**: Tick only one level in each section.

Horse Riding Beginner  Novice  Some experience  Confident  Experienced

Kayaking Experience Beginner  Novice  Some experience  Confident  Experienced

Swimming Ability Beginner  Novice  Some experience  Confident  Experienced

**Particular Interests**: Please list your child’s special interests as we try to cater for as many interests as possible. Click here to enter text.

Whilst at Camp, I agree to abide by all the Camp rules and expectations, co-operate with Camp Staff and Leaders, and respect Camp property. I understand that if I do not do this, I can be sent home.

**Camper’s Signature**: ………………………………………………………

**Date**: ………………………………………………………………………………

**Payment:** Early Bird (before 1st September 2020) - $375  Standard Pricing - $460  Payment Plan – link here

* Please note: your registration is not confirmed until we receive full payment. Sorry, no EFTPOS or credit card facilities available.
* Bank Details for Direct Credit – Please ensure that you put your child’s name in the Reference line.

Bank Name: Kiwibank; Account Name: Lakewood Lodge Limited; Account Number: 38-9010-0455982-00

Please email the completed signed form to [jeff@lakewoodlodge.co.nz](mailto:jeff@lakewoodlodge.co.nz) Cell Ph: 027 499 4030

Important: Parent/Caregiver – Please read and complete by ticking each line and signing at the bottom. Your child may not attend until all boxes have been completed and the form is both signed and dated.

* I am aware that the activities provided by Lakewood Lodge involve an element of risk.
* I understand that Lakewood Lodge accepts no responsibility for accidents or situations arising from the improper use of camp equipment.
* I and my child agree to abide by the camp rules. I agree that any serious misconduct by my child will result in him/her being sent home at my expense and at any time, at the sole discretion of Lakewood Lodge.
* I agree that the staff and leaders will have no liability of any kind in the event of any injury or loss which the camper may sustain to person or property.
* I agree that the organizers, land owners and land managers will be cleared of all liability in the event of an accident or loss of person or property occurring on their land.
* I give permission for any photos or movies taken during this Camp to be used for promotional purposes by Lakewood Lodge.
* I understand that I give my permission for my child, in the case of accident/sickness, to be taken for/or given medical treatment at my expense and agree to reimburse Lakewood Lodge for any expenses incurred.
* I confirm that I have read and understand this declaration and also confirm that the information stated on this form is accurate to the best of my knowledge.
* I understand that this personal information will not be shared with any 3rd party unless it is for legal audit purposes.

**Parent/Guardian/Caregiver Signature:** …………………………………………………………..

**Date**: …………………………………………………………………………..

On arrival at camp:

**Child Signature:** ………………………………………………………….

**Date**: ……………………………………………………..