

2nd World Jamboree for Burn Children 2008
Cape Breton, Nova Scotia, Canada
August 4th-10th, 2008

CAMPER REGISTRATION FORM

(Please e mail to jamboree@canadianburnfoundation.org or fax +1 780 486 4468)

Name _____

Address _____

Gender Male _____ Female _____ T-Shirt size S__ M__ L__ XL__

Sponsoring Organisation _____

Date of Birth _____

Citizenship _____

Contact (Parents)Name(s) _____

Number _____

(Other) _____

Number _____

Health Insurance number _____

(Social Security, NHI, etc

Insurance Carrier _____

Please answer yes or no to the following:

Is or does the camper:

Taking any medication? _____ Wearing pressure garments? _____

Allergic to anything? _____ Have any special dietary needs? _____

Have special physical needs? _____

If you answered Yes to any of the above please explain.

Able to receive "over the counter" medication such as Aspirin _____

Do you intend to extend your stay after the Jamboree? _____

Any other information you feel we should know.

Medical Release Form

I/We are the legal Parent(s)/Guardians of _____

In the event I/We cannot be contacted in an Emergency I/We give permission to the Jamboree Director or designate, in cooperation with the child's chaperone whenever possible, to secure proper medical attention during my child's visit to Canada and whilst in the care of Canadian Burn Foundation and its agents.

Signed: _____

Signed: _____

Dated: _____

Witnessed: _____

PHOTO RELEASE

The photograph(s), video, and general information may be used as deemed appropriate by the Canadian Burn Foundation and may be published in, or used by, any media or publication (including newspapers, magazines, television, radio, pamphlets, brochures, reports, etc.) without any liability on the part of the Canadian Burn Foundation and its agents.

I hereby grant permission for the taking of photographs of

(name) _____

and for the use of the photos. I understand that a photographs and electronic images may be used without compensation.

Signature: Parent or Legal Guardian _____

Please Print Name _____

Date _____

AGREEMENT AND RELEASE

In consideration of the Canadian Burn Foundation undertaking a Burns Jamboree to benefit attendees and activities incidental thereto, including transportation provided to and from Camp events, at the request of the undersigned acting on behalf of all the Camper's parents or guardians, the undersigned agrees, represents and certifies as follows:

1. The undersigned is a parent or legal guardian of the Camper and has full and complete authority to execute this agreement.
2. It is recognised that the Camper's participation in the programme mentioned above, and all activities of this Jamboree, that it be agreed that the risk of any injury loss or damage is assumed by the Camper and all of the Camper's parents or legal guardians.
3. The undersigned and all of the Camper's parents or legal guardians waive, remise, release forever the Canadian Burn Foundation and their respective officers, agents, employees and representatives from all liability, claims or damages, except for those resulting from recklessness or wilful misconduct, on account of injury to the Camper or loss or damage to the Camper's property. These activities include, but are not limited to:
travel to and from the Camp, activities held at Camp, activities held away from Camp, meals, overnights excursions, etc.

By signing this agreement and release, the undersigned acknowledges and represents that he or she has read and understands each of the provisions and understands that the Camper will participate in activities that may include, but not limited to: horseback riding, swimming, ropes course, canoeing, hiking, and trips off the Camp property. All activities are well supervised and staffed by qualified personnel, Camp counsellors and certified instructors and all volunteers will have a current criminal record check.

Campers name and date of Birth:

Please Print _____

Signed: _____

Signed: _____

Date: _____

CHAPERONE INFORMATION

It is recognised that chaperones from countries outside Canada have been carefully selected by sponsoring organisations and have met all legal requirements of their home country. The information provided here is solely for the use of the Jamboree committee whilst you are attending the Jamboree and in case we need to contact someone in an emergency. Providing this information also assists us in meeting the legal requirements in Canada.

NAME _____

HOME
ADDRESS _____

CONTACT PHONE _____

E -MAIL _____

DATE OF BIRTH (OR "OVER 21") _____ SEX _____ M _____ F

EMERGENCY CONTACT (Name and phone #) *optional*

T Shirt size S___ M___ L___ XL___

Please list any medical condition, dietary need, or physical assistance you require:

PHOTO RELEASE - ADULT

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I hereby grant permission for the taking of photographs of me

(name) _____

and for the use of the photos. I understand that a photographs and electronic images may be used without compensation.

Signature: _____ Date _____

Please Print Name _____

MEDICAL RELEASE FORM - ADULT

Name: _____

I hereby give permission to the Jamboree Director or designate, to secure proper medical attention for me should I not be capable of obtaining such assistance due to injury all illness during my visit to Canada and whilst in the company of the Canadian Burn Foundation. (If you are travelling with another chaperone you may also designate them or any other capable adult present to be your proxy)

Signed: _____

Dated: _____

Witnessed: _____

FLIGHT ARRIVAL AND DEPARTURE INFORMATION

Date of Arrival _____ Airport: Halifax (YHZ) Sydney (YQY)
(Please Circle)

Time of Arrival _____

Airline _____

Flight number _____

Please list all attendees arriving on this flight:

_____	_____
_____	_____
_____	_____
_____	_____

Please indicate Chaperones "C"

Date of Departure _____ Airport: Halifax (YHZ) Sydney (YQY)
(Please Circle)

Airline _____

Flight Number _____

Time of Departure _____