

Ukrainian American Youth Association 2006 Camp Registration

CAMPER INFORMATION *(Please Print in English)*

Last Name _____

Прізвище (укр.) _____

First Name _____

Ім'я таборовика (укр.) _____

Address _____

Активний член СУМу? ні так

якщо так - Осередок в: _____

Date of birth (mm/dd/yy) _____ / _____ / _____

Ukrainian School Grade Completed _____

Gender Male Female

Speaks Ukrainian: Fluently/Native speaker

School attended daily _____

Poorly Fairly Not at all

Grade completed at this school _____ Location of school _____

CAMP ATTENDING *(Use one registration form per camp)*

Velosypednyj Vyshkilnyj Year 1 2 3

Praktychnyj Sportovyj

Vidpochynkovyj Sumenyata Week 1 2 Both

Perekhodovyj Husenyata Week 1 2 Both

Mystetskyj



CHECKLIST

Signed registration form

\$100 deposit

2 copies of:

Completed health form

Insurance card

T-SHIRT SIZE

Select one: **Child Size:** S M L or **Adult Size:** S M L XL XXL

PARENT/GUARDIAN INFORMATION *(Please Print in English)*

Name(s) of Parent(s) or Legal Guardian(s) _____

Home Tel.# (_____) _____ Parent's E-mail: _____

Mother's WORK or CELL# (_____) _____ Father's WORK or CELL# (_____) _____
circle one circle one

PARENTAL AGREEMENT

I, the undersigned parent/guardian, assume full responsibility for payment of all camp fees, related expenses and all medical expenses incurred by my child. I understand that camp fees and registration costs are not refundable. I understand that I am liable for all costs related to, but not limited to, damages caused by my child, or for additional costs incurred by the Ukrainian American Youth Assoc., Inc. (UAYA), as a result of my child's actions, be they intentional or unintentional (e.g. telephone, damages, kiosk, etc.). I give the UAYA the right and permission to copyright, and/or use, and/or publish photographic portraits, pictures, or likenesses of my child depicted during his/her stay at camp, through any media, including, but not limited to newspapers and/or the Internet and, for art, advertising or any other lawful purpose. Furthermore, I understand that for unbecoming conduct my child can be expelled from camp, without reimbursement of cost, at the absolute discretion of the management, Camp Director and/or Medical Director. My child has been made aware of the rules and regulations of the UAYA Camp in Ellenville and I and my child agree to abide by them.

Signature of Parent or Guardian _____ Date _____

CYM BRANCH RECOMMENDATION

I certify that the applicant is an *(check one)* active member inactive member of the Ukrainian American Youth Assoc. Branch in _____ and recommend that he/she be admitted to camp.

Signature of President/Bulavnyj _____ Date _____

FOR OFFICE USE ONLY

DATE REC'D _____	CAMP COST \$ _____	<input type="checkbox"/> LATE REGISTRATION
INIT. _____	±FEES/DISC. _____	<input type="checkbox"/> P/S/H SURCHARGE
ENT'D _____	TOTAL DUE \$ _____	<input type="checkbox"/> OTHER
VER'D _____	DEPOSIT (_____) _____	RECT# _____
	BALANCE \$ _____	RECT# _____

Send to:
UAYA Camp
8853 Route 209
Ellenville, NY 12428
 печатка