



ДОМИК

ШКОЛА РУССКОГО ЯЗЫКА

www.domikru.ca

Camp registration form

Регистрационная форма для лагеря



MON
ПН



TUE
BT



WED
CP



THU
ЧТ



FRI
ПТ

Last Name of a child Фамилия ребенка			
First Name of a child Имя ребенка			
Date of Birth (dd/mm/yy) Дата рождения (дд/мм/гг)			
Home Address Домашний адрес			
City Город			
Postal Code Почтовый код			
Home Phone Домашний тел.			
Cell Phone Сотовый тел.			
Email Электронная почта			
School Name and Grade Название школы и класс			
Mother's Name Имя и фамилия мамы			
Father's Name Имя и фамилия папы			
Emergency Contact Контактный тел. в случае необходимости			
Allergies/Special Needs Дополнительная информация о вашем ребенке			
Note: If you are sending an e-transfer please indicate your child's full name and payment period.	Примечание: Если Вы присылаете e-transfer, пожалуйста, указывайте в комментариях полное имя ребенка и период оплаты.	E-Transfer liliat@inbox.ru	

PHOTO/VIDEO RELEASE FORM

I hereby give permission for images of my child, captured during summer camp activities through video, photo and digital camera, to be used solely for the purposes of Domik Inc promotional material and publications, and waive any rights of compensation or ownership thereto.

Name of Participant (please print): _____

Age: _____

Name of Parent/Guardian (please print): _____

Parent/Guardian's Signature: _____

Date: _____

WAVER/ RELEASE

I hereby give permission to my child to participate in activities provided by Domik Inc during summer camp and assume full responsibility for all the risks of injury or loss, which may result from my child's participation in these activities and hereby agree to hold harmless, release and discharge Domik Inc its officers, agents, managers, supervisors, and employees. I state, that there are no apparent health conditions of my child, which would hinder or prevent his / her active participation in the summer camp activities.

Name of Participant (please print): _____

Age: _____

Name of Parent/Guardian (please print): _____

Parent/Guardian's Signature: _____

Date: _____