



Nisga'a Ts'amiks Vancouver Society

3983 Dumfries Street, Vancouver BC V5N 5R3

Phone: (604) 646-4944 Fax: (604) 646-4955 Website: www.tsamiks.com

SPRING BREAK 2018 DAY CAMP REGISTRATION KIDS AGES 7-12/ TEENS AGES 13-18

Child/Teen's Information

Surname: _____ First Name: _____ Age: _____

Citizenship # _____ Birthdate: ____/____/____ Gender: Male / Female
mm dd yyyy

Care card #: _____ Has Own Compass Card?: ___ Yes ___ No

Parent/Guardian Surname: _____ First Name: _____

Address: _____

City: _____ Postal Code: _____

Phone Number: _____ Cell #: _____

Email: _____ Work #: _____

Family doctor: _____ Doctor Ph: _____

Medical Conditions :

Is your child on any Medications: Yes ___ No ___ Please describe: _____

Does your child have any allergies: Yes ___ No ___ Please describe: _____

Does your child use an inhaler: Yes ___ No ___ Permission to assist your child with inhaler?: Yes ___ No ___

Does your child have any physical or mental disabilities?: Yes ___ No ___

Please describe: _____

Emergency Contact Information

Name: _____ Relation to participant: _____

Phone #: _____ Cell #: _____

Please check which week you would like to sign your child up for:

Kids Camp Days (Ages 7-12)

Mon. March 19 ___ Wed. March 21 ___ Fri. March 23 ___ Mon. March 26 ___ Wed. March 28 ___

Teen Camp Days (Ages 13-18)

Mon. March 20 ___ Wed. March 22 ___ Mon. March 27 ___ Wed. March 29 ___

**Parents can enroll their Child/Teen up for more than one day camp, but please note that priority will be given to new participants.*

**Confirmation for camps will be given at least 2 days prior to camp starting.*

Please give any other information you think would be important for us to know about your child to ensure they feel comfortable and have a good experience: _____

Parent Signature: _____ Date: _____

Completed forms can be sent to programadmin@tsamiks.com or faxed to (604) 646-4955