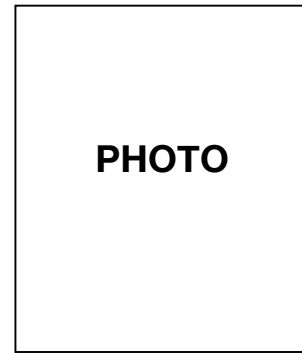




JFK SWISS OUTDOOR CAMP REGISTRATION FORM 2018



Name of Child: _____
Family Name _____ Given Names _____

Name Used: _____ Nationality: _____

Date of Birth: _____ (Day / Month / Year) Boy Girl

First Language: _____ Second Language: _____

Other Languages: _____

The applicant would like to attend the camp as a: Boarder Day Student

Desired period of the camp (please tick):

- 2 weeks** June 30th – July 14th 2018 July 7th – July 21st 2018
 July 14th – July 28th 2018 July 21st – August 4th 2018
 July 28th – August 11th 2018
- 3 weeks** June 30th – July 21st 2018 July 7th – July 28th 2018
 July 14th – August 4th 2018 July 21st – August 11th 2018

Airport Transfer: Yes No

(CHF 360.00 per child per airport transfer, UM charges additional. Flight details can be sent once the registration is confirmed.)

Names and Ages of Other Children in the Family:

Special Health, Physical or Learning Concerns:

Strengths and Interests: (e.g. sports, hobbies, subjects, achievements)

PARENT / GUARDIAN INFORMATION:

	<u>MAILING ADDRESS AND CONTACT NUMBERS OF FATHER / GUARDIAN</u>	<u>MAILING ADDRESS AND CONTACT NUMBERS OF MOTHER / GUARDIAN</u>
Family Name
Given Names
Address

Home Tel.
Business Tel.
Fax No.
Cell Phone
E-mail
Occupation

Should camp mailings be sent to two separate addresses? _____

With whom does the child live? (parents, father, mother, guardian, etc.)

Who is responsible for paying the fees?

How did you find out about the JFK Swiss Outdoor Camp?

We hereby declare that we agree with the terms and conditions of enrolment at the JFK Swiss Outdoor Camp and that if the above-mentioned applicant is accepted, these terms will be honoured.

_____ Date _____ Signature of Parent / Guardian