



Lions Visually Impaired Youth Camp, Inc

Lions Bear Lake Camp Leadership Development Application – 2nd Year

<i>(Please print)</i>	<i>First</i>	<i>Middle</i>	<i>Last</i>		For Office Use			
Name of child:				Session Dates: _____	Cabin: _____ Payment: _____			
Address:				_____				
	<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip</i>				
Age:	Date of Birth:	Sex:	Home Phone: ()					
<i>(Please print)</i>	<i>First</i>	<i>Middle</i>	<i>Last</i>					
Name(s) of _____ (1)								
Parents: _____ (2)								
Place an X in the session(s) you would like to attend:								
<input type="checkbox"/> Deaf and Hard of Hearing (7/14-20) <input type="checkbox"/> Visually Impaired 1 (7/7-13) <input type="checkbox"/> Visually Impaired 2 (7/21-27) <input type="checkbox"/> Juvenile Arthritis (7/28-8/2)								
I am interested in receiving registration information via email. My email address is: _____								
T-Shirt Size:	Adult <input type="checkbox"/>	Youth <input type="checkbox"/>	S <input type="checkbox"/>	M <input type="checkbox"/>	L <input type="checkbox"/>	XL <input type="checkbox"/>	XXL <input type="checkbox"/>	<input type="checkbox"/> _____
	<i>Place X in one of two above</i>		<i>Place X in proper size category</i>					
Certifications:								
Swimming: _____ First Aid/CPR: _____ Other: _____								
Education:								
School Attending: _____								

Please write a brief statement on why you wish to participate in 2nd year of Leadership Development. Elaborate on how your 1st year experience has impacted your decision to apply for the 2nd year program. Attach additional sheets if necessary:

PARENT (LEGAL GUARDIAN) AGREEMENT

CONSENT TO ATTEND AND PARTICIPATE

I hereby give consent for my child (ward) to attend and participate in all programs and activities of the Lions Visually Impaired Youth Camp Inc. (hereafter also identified as Bear Lake Camp). I understand that my child (ward) will participate in an outdoor recreation program which may encompass activities including, but not limited to ropes course, archery, hiking, camp out and water sports and that one or more of these or other activities may involve travel off of the Bear Lake Camp site. I understand and acknowledge that while the agents, servants, employees, and/or volunteers may have received training on safety techniques, there are nevertheless risks associated with, and inherent in, my child's participation in the camp's outdoor recreation program and other camp programs and activities. I voluntarily choose to assume these risks and allow my child (ward) to attend camp and participate in all Bear Lake Camp programs and activities.

I further consent to the Bear Lake Camp taking pictures, audiotapes and/or video tapes of my child (ward) participating in Bear Lake Camp activities and programs and the Bear Lakes Camp use of same in camp publications or publicity that is in the proper interest of the Lions Visually Impaired Youth Camp Inc.

PERSONAL PROPERTY

I understand the Bear Lake Camp in no way covenants the condition of any personal article or item of property upon the conclusion of any camp session and that unnecessary valuables are not to be brought to camp.

Signature of Parent or Guardian: _____ Date: _____

Important Please Read

***Please include with this application the following:
Registration Fee if applicable.***