

ALL DAY
JUNE 10
ONLY \$5

YEAR END ROADTRIP

This massive end of year party is open to all grade 6-12 students who attend PYM, their friends, and their families! Find out more and register for this day of wild fun and adventure at Camp Qwanoes by filling out the two forms on this flyer and returning them to PYM as soon as possible (space on the bus is limited).

Experience water and land activities all day, special music, and free lunch & supper BBQ, plus an evening concert and way, way more! So grab your sunscreen, pack your swimsuit and prepare for a fantastic day.



GUEST REGISTRATION

(Permission Form #1 of 2 to fill out)

TO BE COMPLETED IN FULL BY ALL GUESTS AND HANDED IN AT PYM OR AT THE CHURCH OFFICE BY JUNE 7th.

NOTE: THE BOTTOM MUST ALSO BE SIGNED BY ALL ADULTS 18 YEARS AND OVER.

* space is limited on our buses, so get your forms back now!

First Name _____ Last Name _____

Is This Your First Time At Qwanoes? Yes No

Birthdate _____ Mr. Mrs. Ms. Miss

Address Information:

Mailing Address _____

City _____

Postal Code _____ Phone _____

Email Address _____

Church _____ None

ADULTS (18 & OVER), PLEASE READ AND SIGN BELOW:

The undersigned hereby releases and forever discharges Camp Qwanoes and its servants, agents, and employees from any and all actions, causes of action, claims and demands whatsoever, whether existing as of this date or in the future, and whether arising from the use of Camp Qwanoes or otherwise. Permission is also given to have photos taken at camp used in future camp promotional material, and to be added to the camp general mailing list.

Signature _____



'Qwanoes Open House Daytrip' – Saturday, June 10th
PERSONAL & MEDICAL INFORMATION FORM
(Permission Form #2 of 2)

Name of Group: Parksville Youth Ministries (Parksville Baptist Church)

Name of event: 'Camp Qwanoes Daytrip' (space is limited so register soon)
Saturday, June 10th – leaving from PFBC parking lot at 10:00am ...
returning for pickup at 8:30pm at PFBC

Cost of event: \$5 per student (limited seating) – includes transportation and everything
else during the day, including all activities, plus both a lunch and a supper.
*** don't forget to bring your swimwear and a towel!!*

Student's Name: _____ Grade: _____ School: _____

Address: _____ Phone: _____ Email: _____

1. Is the teen suffering from illness or physical handicaps? Yes No
(eg. allergies, bronchitis, epilepsy, etc.)

2. Is he/she on any medication or treatments? If so, what?

Any additional information that should be known?

Mother's name: _____ Father's name: _____

Mother's phone: _____ Father's phone: _____

BC Health Card Number: _____ Birthdate: _____ (mm/dd/yyyy)

Doctor's name: _____ Doctor's phone number: _____

You have permission for my child to receive any emergency treatment that may be necessary.
I further release and forever discharge the above organization, its representatives and leaders from any claim, debt, charge or damages
arising, or which may in future arise over the operation of any activity and for transportation to and from the activity.
I also allow any photos / video taken to be used for promotional use by PYM.

Date: _____
(Signature of parent/guardian)

Alternate contact if parents not available:

Name: _____

Address: _____ Phone: _____