

DECLARATION (for minor participants)

All participants in the work camp program of the Ecumenical Youth Services, who are not yet 18 years old, must return the following statement with the signature of a parent or legal guardian in order to be eligible to participate in our camps. Please send it to the EYS office.

I permi	t my daughter / my son to par	ticipate in the wor	kcamp:		
Surname of the child			christian name of the child		
	nd place of birth of the child				
Guardi	ans / parents can be connecte	ed as follows			
					(name)
					(address)
					(phone/mobile)
Place a	and date of the camp:				
	I have instructed my daughte	er / my son to follo	ow the instruction	ns of the camp lea	aders
•	We hereby give permission f boyfriend/girlfriend.	-	ep in the same b	•	his
•	My son / my daughter is	swimmer□	nonswimmer□] (please mark w	vith a cross)
•	We hereby give permission f swimming pool / in the lake /		_	without direct sup	-
•	My child has the following phepilepsy etc.):	nysical complains	(e.g. allergies, fo	ood allergies, dia	betes, asthma,
•	My child has to take the following medication on doctor's orders:				
•	Last tetanus jab received on:				
•	I am aware that the camp leadership take no responsibility for the loss of personal items				
•	The address of my child may travel groups	/ be passed on to	other participan yes□	ts for the purpose no□	of forming
•	Ecumenical Youth Services in the Commission's own pul		ohotos taken at t yes□	he work camp fea no□	aturing my child
Signature of the parents or the legal guardian			place and date		