

# Camp Kawkawa Ladies Craft Weekend

February 19-21, 2010

Last Name	First Name	Birthdate
Street Address		City
Province	Postal Code	Phone #

Email Address:

Emergency Contact Name      Emergency Contact Phone #'s:

How did you hear about this craft weekend?

Names of those you would like to bunk with:

What kind of projects will you be working on: (check all that apply)

**Card Making**            **Other craft**            **Digital scrapbooking**     

**Traditional scrapbooking**     

**I will need an electrical outlet**            (bring your own extension cord/power bar)

What classes are you interested in: (check all that apply)

**Stamping classes**            **Traditional scrapbooking**            **Digital scrapbooking**     

**CREDIT CARD PAYMENT      CAMP FEE: \$129**

Credit Card Type:      **VISA**            **Mastercard**     

Card Number:      Expiry Date:

Name exactly as on card:

Signature:

## **CANCELLATION POLICY AND REFUNDS:**

More than 4 weeks before camp      Camp fee of \$129 less \$50

1 - 4 weeks      50% refund

Less than 1 week      No refund

## **CAMPER DECLARATION:**

I hereby release Camp Kawkawa, its board members, staff and sponsors from responsibility or liability for any injury or illness that this applicant may sustain during this activity. In the event of an emergency, if I am unable to be contacted, I hereby authorize an adult leader of Camp Kawkawa, as an agent for me, to consent to any x-ray examination, medical or dental treatment, or hospital care advised and supervised at a licensed facility under the law of the province.

Camp Kawkawa may use photographs or video images of the applicant for promotional purposes.

Signature:

Date:

Send to: **Camp Kawkawa**

66706 Kawkawa Lake Road  
[kawkawa@tagline.cc](mailto:kawkawa@tagline.cc)

Hope, B.C. V0X 1L0  
FAX: 1-866-545-9359