APPLICATION FORM II Summer Golf Camp for Juniors 15 – 22.07.2018

(Please complete all sections of this form. All applications must be delivered by: **02.07.2018**)

1.	Name and surname of child	
2.	Parents names	
3.	Date of birth	Age: 🗌 Boy 🔲 Girl
4.	Address	Country
	City and postcode	e-mail
5.	Address of the parents at the time residence of the child at camp:	
	Parent Cell Parent Cell	
6.	Choose training for a child on :	
	- 18 holes golf course for advanced player	rs
I	gree to pay the costs residence of the child by n the amount ofeu n words account of Binowo Park Sp. z o.o., Bank PEK	ros
	FORMATION PARENTS (GUARDIAN) ABO (eg. allergies, motion sickness, glasses, denta	
fan 	nily situations that would require your child to	y be appropriate for us to know including any conditions or receive extra care:
Te	rms and Conditions:	
Sur	peaked cap, remedy for insects, sunscreen, warm things. The cost of participation in the camp includes: accom classes with a professional instructor, supervision of ex green fee. Resignation from participation in the camp: The participation no later than 10 days prior to the start of camp. In case of cancellation of participation in the camp the start of camp, Binowo Park SP. z o.o. may demand of During the camp there is absolute prohibition of alcohol You consent to us taking and publishing (whether on consuct media representation of your child during camp. For any damage caused by the participants parents are the parent/guardian of the above named	modation, full board, transfers between the bungalows and golf course, perienced staff, golf equipment, the tokens on the driving range and the pant withdraw from the camp without giving reasons, by filing a written mp. for reasons not dependent on Binowo Park and less than 10 days prior to compensation for preparation and expenditures has been made. consumption and cigarette smoking. bur website, in brochures or otherwise) photographs, videos and/or other
	(date)	(signed)

FILLS THE ORGANIZER !!!

DECISION PARTICIPANT QUALIFICATIONS Decides to: 1. Qualify and direct the child to participate in a leisure facility for a fee in the amount ofzł., 2. Refuse to placing the child on the base rest because of: (Date) (signature) CONFIRMATION OF THE CHILD'S PLACEMENT The child was at camp course and used the accommodation w CENTRUM ZEGLARSKIE, ul. Przestrzenna 19, 70-800 Szczecin, from the date of 15.07.2018 until 22.07.2018 r. (Date) (legible signature of the manager leisure facility) INFORMATION ABOUT CHILD HEALTH DURING STAY IN THE FACILITY AREA. (Informations about on diseases, injuries, treatment, etc.). The organizer informs parents about the treatment of ambulatory or hospitalization. (Place, date) (signature of physician leisure facility) NOTES AND OBSERVATIONS EDUCATORS-INSTRUCTOR ABOUT CHILD DURING STAY IN THE FACILITY AREA.

(legible signature of the leisure fac

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(Place, date)