

Wynchemna Road Trip Course

Calgary, Alberta - Camping - Vancouver, B.C

Registration Form (15 - 23 years old)

Name of Student:		
		Type of school:
Name / Address of Parents:		
Employments	Con	
	Company:	
	Fax # (with area code)Email:	
My child wants to enroll in the fol		
wants to chi on in the lor	nowing language n	ustruction course.
English instruction — S/he English / French instruction	_	sh for years; OR ned English for years and
		French for years
My child wants to register for the	following course:	
July 4 to August 7, 2020 (fiv	e weeks) July	y 11 to August 7, 2020 (four weeks)
My child is a: non-swimmer	beginner swi	mmer strong swimmer
Special Needs (for example: vegetarian o	or special diet, medicine,	allergies, recent illness or operation)
participants or for any other reason beyond its control. I refunded. — Wynchemna reserves the right to withdraw	In such a case, written notificate participants whose behavior pants. Wynchemna will be und	ted in the brochure because of an insufficient number of tion of cancellation will be sent out and the fees will be is likely to affect the smooth operation of the programme or der no liability to such persons. If a child has to be sent home on
Parent consent:		
Experience has shown that in connection with recreation medical attention is necessary. This is my permission for ward in the event of an emergency without necessity of authority is exercised. — Some of the activities listed in signing this registration form, I give permission to the V	for the official in charge to ma f my prior approval. I understant the brochure (for example, row Wynchemna Instructor to sign	when illness or accident may occur and immediate surgical or ake arrangements for surgical or medical attention for my child and that I will be notified by the quickest means possible if this ock climbing) require an adult to sign liability waiver-forms. By a waiver-form for my child. — I understand and permit that my for advertising or other purposes by Wynchemna (for example
	ire of parent or guard	

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