



Saskatchewan Brain Injury Association

Mailing Address: P.O. Box 3843 | Regina, SK | S4P 3R8
Suite 322 – 310 Main St. N | Moose Jaw, SK | S6H 3K1
230 Avenue R South, SPH Residence, C-Wing, Room 422 | Saskatoon, SK | S7M 2Z1
Phone: 1.888.373.1555 | Website: www.sbia.ca | Email: info_sbia@sasktel.net

Camp Registration Form

Registration Due: June 3, 2017

Name: _____ Chapter: _____

Names of Other Family members included on this form: _____

Primary Contact Person: _____

Mailing Address: _____

Telephone Number: _____ Email: _____

Name First & Last	Age	Mobility Please be specific	Other Special Needs	Dietary Needs	Fee \$55/person \$180/family
Please send us as much information as possible regarding your needs.					Less \$10 for Members
					TOTAL: \$

WAIVER: ALL prescription medications, medicinal licenses and patient information regarding them must be given to the Camp Nurse when you arrive at Camp. No alcohol or illegal drugs are allowed on the premises. If you are asked to leave camp for not abiding by the rules, you will be responsible for any costs associated with you going home. I hereby authorize Saskatchewan Brain Injury Association to release and to publish, in print or non-print form, any photographs, videos or recordings taken of my children and/or myself while attending this camp.

Signature

Date

Please enclose a cheque and your health form for your registration
(if cost is a problem, please contact us)
Fees are non-refundable

MAIL this form & your cheque to:
SBIA, 230 Avenue R South, SPH Residence, C-Wing, Room 422 | Saskatoon, SK | S7M 2Z1
If you have any questions please feel free to contact Tracey Monette at sbia.events@sasktel.net