

CONDITION FORM



I have read the information about the **Spring Camp 2018** and I



want to register my child:

do not want to register my child:

for Spring Camp 2018 from May 19th to 21st at the scout hut / camp site of „MELScouts“ in Maria Enzersdorf (Lower Austria).

FOR REGISTERED CHILDREN, PLEASE ANSWER THE FOLLOWING QUESTIONS:

My child

- has a **Top**-Jugendticket for the **whole Verkehrsverbund Ost (VOR)**.
- has a Jugendticket **just for traveling to school**.

My child has following **illnesses or allergies**: _____

My child needs the following **medication**: _____

My child is **vaccinated against tick bite fever** (Zeckenimpfung): YES
 NO

Medical **Insurance**: _____

My child has the following **diet**: _____

During the time of camp I can be contacted at the following **address** and **phone numbers** in case of emergencies:

I understand that my child will be sent home at my expense if he or she should persistently disobey the instructions of the leaders.

DATE: _____

SIGNATURE _____