

\*Please complete all fields, sign and send back to [united@rogueadventures.co.za](mailto:united@rogueadventures.co.za)

### GENERAL INFORMATION OF CAMPER

|         |  |            |  |
|---------|--|------------|--|
| Name    |  | Gender     |  |
| ID nr   |  | Grade      |  |
| Cell nr |  | Age        |  |
| Email   |  | Shirt size |  |

### GENERAL INFORMATION OF PARENT/GUARDIAN

|         |  |                     |                 |
|---------|--|---------------------|-----------------|
| Name    |  | Title               |                 |
| Cell nr |  | ID Nr               |                 |
| Work nr |  | Home nr             |                 |
| Email   |  | Join Whatsapp group | <b>YES / NO</b> |

### \*MEDICAL AID INFORMATION

|   |  |
|---|--|
| Medical fund name                                     |  |
| Membership number                                     |  |
| Main member ID nr                                     |  |
| Main member name                                      |  |
| Dependant code  |  |
| Special medical conditions and current medicine taken |  |

\*A copy of the medical aid card and copy of main member ID must accompany the dependant on the camp.

### Terms & Conditions

1. Copies of the parent/guardian' ID, Medical Aid card and participant passport must accompany this entry form.
2. A none-refundable deposit of R250 is required to secure the entry.
3. Successful entry to the the Journey Camp 2019 remains at the sole discretion of United Generation. All rights reserved.
4. Any deposit or moneys paid by unsuccessful applicants will be refunded.
5. **All payments to be made to United Generation, using the participants name and 'TJC' as reference.**

|                 |               |
|-----------------|---------------|
| Bank:           | FNB           |
| Account number: | 626 803 81466 |
| Branch code:    | 250 655       |
6. No cheques will be accepted as payment.
7. The indemnity waiver must be read, completed and signed by all parents or guardians.

### Indemnity waiver

Hereby I, \_\_\_\_\_

ID Number \_\_\_\_\_

parent/guardian of the JOURNEY Youth Camp 2019 participant

\_\_\_\_\_

acknowledge and agree to that the participant do so entirely at his/her and my own risk and by doing so agree that I and my dependents do not have, and will not institute, any claims whatsoever (in respect of any loss or injury arising from any cause at all, regardless of whether or not the same shall have been caused directly or indirectly by negligence) against United Generation, Rogue Adventures or any employee/volunteer/representative in any way associated with the said parties and also agrees to indemnify them from all liability regarding the the JOURNEY Youth Camp 2018 participant that is under 18 years . I also warrant that he/she is authorized to and do consent to such minor being bound by the a foregoing and further indemnifies the aforementioned parties to the extent, if any, to which the minor is not bound.

Date \_\_\_\_\_ Place \_\_\_\_\_

\_\_\_\_\_  
Signature