KMC HIKING CAMP 20010 REGISTRATION FORM

(Must be at least 19 years of age)

KMC Hiking Camp Committee reserves the right to cancel or relocate a camp, either before or after its commencement, in response to unforeseen circumstances.

CAMP 1: Camp 1-July 24-31 CAMP 2: July 31-Aug 7 CAMP 3: Aug 7-14

NAME #1 _____

ADDRESS _____

Postal Code _____ PHONE NUMBER _____

E-MAIL **(required)**

_____

NAME #2 _____

ADDRESS _____

Postal Code _____ PHONE NUMBER _____

E-MAIL **(required)**

_____

PLEASE NOTE: When two names are listed on this registration form they will be drawn as a *couple/group* for the lottery. Any persons wishing to be considered as single for the lottery must complete a separate registration form.

1. Preference of camp for the lottery: First choice: _____ Second choice: _____ Third choice: _____
2. The beverage I (we) prefer at dinner is:
   5 oz White Wine ❑ (#1) ❑ (#2) **OR** 5oz Red Wine ❑ (#1) ❑ (#2) **OR** 8 oz Juice ❑ (#1) ❑ (#2)
3. I (we) will require a ride: Yes _____ No _____
4. I (we) can transport passengers: Yes _____ No _____
5. I (we) have a truck which can transport food and equipment: Yes _____ No _____
   (Please note that both Camps 1 & 3 must have at least one person with a truck to carry camp gear to and from camp)
6. I would like to be considered as **a camp leader**: Yes _____ No _____
7. I would like to be considered as **a camp cook**: Yes _____ No _____

Please read and initial the following:	# 1	# 2
I (we) understand that both camp preparation and in-camp tasks are a cooperative effort and that I (we) will be required to complete tasks both prior to camp and during it.		
I (we) understand that Camp 3 participants are responsible for ensuring that all camp equipment is returned to the its storage location, and that if I (we) am/are a participant of Camp 3, I (we) may required to transport some camp equipment from the camp rendezvous back to its storage location.		
I (we) understand that I (we) will be required to read and sign an indemnity and release of liability waiver prior to boarding the helicopter, and that my (our) signature will be witnessed by the camp leader or a hiking camp committee member.		

_____ _____

Signature #1 Signature #2

CHEQUES ARE PAYABLE TO: KMC HIKING CAMP

Mail to: Paula Barnes, KMC Hiking Camp, 512 Second St, Nelson, BC V1L 2L5