

## Registration

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## Personal information, ONE Registration Form for each participant

Full name:		Age:	Birth Date:
Gender:	Male	Women	Other
Home address:			
Postal Code:			
City:			
Country:			
E-Mail:			
Passpo <mark>rt Number:</mark>			
Able to swim:	Yes	No	
T-shirt size	XS S	M L	XL XXL
			OTHER SIZE
Sp <mark>ecial foods needs?</mark>	No Yes, w	hat?	



## Registration

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Any medical needs?	No	I don`t want to reveal		
	Yes, wha	t?		
Extra accommodations or extra information?	No			
	Yes, wha	t?		
For example, if you have deafblindness or you are a wheelchair user				
Statement of Agreement				
	nd videos are	ohed and filmed during the Camp and the rights keep by EUDY. The SOC can share them on their		
I agree that I'm assuming the risk of violation of the camp politics regarding personal security, alcohol and drugs and I'll accept my exclusion from the camp when it is asked.				
I agree, I myself will take the full responsibility for my own medicine and personal items and not EUDY nor the SOC				
I will send a picture of myself and a copy of my passport to my YNAD with the Registration				
If you have any personal questions, please contact us! eyc2018romania@gmail.com				
Date:				
		The signature of the participant		