



Central Okanagan Science
 Opportunities for Kids Society
 199 Reynolds Road, Kelowna
 BC V1V 2G7

Information Form

Children's Programs

CONTACT INFORMATION

Name of program: SOKS Camps Location: Benvoulin Heritage Church Date of Camp: starting

Child's Name	
Phone :	Date of Birth
Mother's name	
Father's Name	
Parent email	

Name of person/people authorized to pick up your child, including parents :
Child will not be able to leave with anyone who is not on this list

Authorization for your child's picture to be used to promote SOKS publicity YES NO

Parent/Guardian signature _____ Date: _____

MEDICAL INFORMATION

Doctor's Name	Phone:
Allergies	
Disabilities	
Medications	

Authorization in case of emergency: In case of an accident (or serious illness) I authorize SOKS staff to contact a physician or ambulance if I, or any other guardian cannot be contacted immediately.

Parent /Guardian Signature _____ Date: _____

Please print your name _____