



Salt and Light Kids Indemnity Form

Incomplete or non-existent indemnity forms for individuals will result in that person being excluded from activities and the use of equipment for the duration of your camp with no liability to Salt and Light Kids.

Salt and Light Kids and its appointed representatives and volunteers will take every precaution for your safety during your stay. Please note that there is an inherent risk involved in all activities run by **Salt and Light Kids** and through the use of its accommodation and catering facilities as well as both indoor and outdoor activities and program facilities. **Salt and Light Kids** operates on a challenge by choice philosophy and all persons using the site and its associated activities do so voluntarily and at their own risk.

Salt and Light Kids, its staff and volunteers assume no liability for any accident, injury, personal loss or death through any cause whatsoever.

Indemnity

I _____ (person attending camp) and my parents/ guardians do hereby indemnify **Salt and Light Kids**, and any of their officials, employees, or representatives against any loss, damage, injury, or death caused to any person or property for whatever reasons or cause, either directly or indirectly whilst on the property and/or under the care **Salt and Light Kids**.

I as the parent / guardian of the above named person do hereby authorize **Salt and Light Kids** to take the appropriate First Aid response and to contact and/or transfer the above mentioned person to the relevant doctors, ambulance services and hospitals in the event of an emergency. All medical costs will be for my own account.

I, hereby grant permission to Salt and Light Kids to post my child's story, photo, or video on the Salt and Light Kids' Web site, Instagram or Facebook account.

Parent/Guardian Signature

Date



GRADE 7 TRANSITION CAMP

4 - 6 OCTOBER 2019 | R700

SOS WILD CAMP SITE | VILLIERSDORP



CONTACT SANMARIE
www.saltandlightkids.co.za
camp@saltandlightkids.co.za / 0722624770



Grade 7 Transition Camp: By Salt and Light Kids

Salt and Light Kids hosted a transition camp for the past 6 years. **The purpose of the annual camp is to prepare** your child for what awaits them in high school. The program for the camp will focus on the management of their key **relationships:** their parents, friends, themselves and God. Based on the relationship already established through the Hope for kids program we see ourselves ideally positioned to assist in preparing your child for the transition to high school.

- Date:** Friday 4 October 2019 from 15:30
Sunday 6 October 2019 till 14:00 (back in Paarl)
- Transport:** Busses leave from 'Bean In Love' parking area at 15:30
- Place:** SOS Camp Site Villiersdorp (soswild.org.za)
- Cost :** R700 (accommodation, activities and all meals)

Adult supervision will be provided for the duration of the camp (10 facilitators from Salt and Light Kids as well as SOS Wild personnel)

Camp fees are payable directly to:

- Acc name:** Salt and Light Kids FNB Paarl
- Acc no:** 62456358011
- Branch:** 250655
- Reference:** Child name, surname and School
(PBHS, PGHS, GIM, HugoR,
LaRochele, WA Joub)

Can you sponsor a learner?

We like to assist learners unable to pay
Contact Jaco Viljoen
Cell: 073 432 7343
Email: jaco@saltandlightkids.co.za

Camp necessities:

- Liability form
- Sleeping bag, pillow and PJs
- Toiletries, towel and medication
- Swimming costume, hat, sunblock
- Bible
- OWN crockery and cutlery
- Torch (very important) borrow one if don't have one
- Camp clothes: comfortable old clothes
- Warm clothes for evenings
- Comfortable shoes

Please inform Sanmarie Kleynhans of any dietary requirements and or any allergies or medication at camp@saltandlightkids.co.za

Kind regards,
Salt and Light Kids – Camp coordinator



Entry Form

Personal Information of camper

Name and Surname: _____

Gender: M / F

Cell Nr: _____

Email: _____

School: _____

Info of Parents/Guardian

Title: _____ **Initials:** _____ **Surname:** _____

Cell Nr: _____

Postal Address: _____

Email: _____

Emergency Contact Person

Friend/Relative name: _____

Cell Nr: _____

Relation: _____

Medical Info

Medical scheme name: _____

Medical Scheme nr: _____

Chronic Medication /Allergies or Special Dietary needs:



BATTLESHIP CAMP T-SHIRTS AVAILABLE AT R150

Name: _____

Size: _____

I would like to order a t-shirt. (T-shirt + Camp = R850)

All forms can be sent to: camp@saltandlightkids.co.za

