



BOYS LEADERSHIP CAMP

Passport photo

PARTICIPATION FORM

Email application to 4x4initiativefoundation@gmail.com

1. Personal Information

Full Name of Participant: _____

Date of Birth : _____

Age: _____

School Name: _____

Grade: _____

Home Address: _____

City? Town: _____

2. Parental/Guardian Information

Parent/Guardian 1

Full Name: _____

Relationship to Participant: _____

Phone Number: _____

Email: _____

Occupation: _____

Parent/Guardian 2

Full Name: _____

Relationship to Participant: _____

Phone Number: _____

Email: _____

Occupation: _____

3. Emergency Contact Information

Full Name of Emergency Contact: _____

Relationship to Participant: _____

Emergency Contact Phone Number: _____

4. Health Information

Does the participant have any allergies, medical conditions, or dietary restrictions?

(Please specify): _____

Is the participant on any medication?

Yes ☐ No ☐

If yes, please provide details: _____

Does the participant have any disabilities that we should be aware of?

Yes ☐ No ☐

If yes, please provide details: _____

5. Pre-existing Behavior and Actions (to be completed by Parent/Guardian)

1. Behavioral History

Has your child been involved in any behavioral issues at home, school or in the community?

Yes ☐ No ☐

If yes, please specify the nature of the issue and any progress:

2. Substance Abuse

Has your child ever had issues with substance use (e.g., alcohol, drugs,)?

Yes ☐ No ☐

If yes, please provide details on the situation and any progress made:

3. School Performance

Please indicate your child's current academic performance and any areas of concern:

4. Social Interactions

How does your child typically interact with their peers?

5. Other Concerns or Issues

Are there any other concerns or issues we should be aware of regarding your child?

6. Camp Preferences

Preferred T-shirt Size:

☐ Small ☐ Medium ☐ Large ☐ Extra Large

Has the participant attended any camps before?

Yes ☐ No ☐

If yes, please provide details: _____

7. Camp Registration Fee

The registration fee for the Boys Leadership Camp is **N\$2000-00** for **Phase 1**: and **N\$ 1000-00** for **BLC Phase 2**. This fee includes accommodation, meals, and activities for the duration of the camp. Please note that the registration fee is **non-refundable** in the event of cancellation unless the cancellation is due to medical or other exceptional circumstances (documentation may be required).

8. Disclaimer and Indemnity

I, the undersigned, acknowledge that participation in the Boys Leadership Camp (BLC) involves physical activities, outdoor experiences, and other events that may carry risks of injury. I hereby release the Boys Leadership Camp, its staff, and organizers from any liability in the event of an injury, loss, or damage to person or property, that may occur during the camp, except in cases of gross negligence or willful misconduct.

I confirm that I have provided accurate information about my child's health, behavior, and other relevant matters, including any disabilities, and I understand that this information will be used to ensure the safety and well-being of all participants.

By signing below, I also agree to the terms regarding the registration fee and indemnity clause.

Parent/Guardian 1 Signature: _____

Date: _____

Parent/Guardian 2 Signature: _____

Date: _____

9. For Camp Use Only

Date of Registration: _____

Registration Fee Paid: Yes ☐ No ☐

Special Requirements/Notes: _____

Contact: Coach SB: 0812400268 Coach Kudana: 0812247360 Elizabeth: 0818390536

Account Details: Name: Soda Consultancy Bank: FNB (Branch Code: 280-172) Acc No: 62276054443