

## CADETS

	REGISTRATION	FORM (202)	3/24)		
Cadet Name:		_Date of Birth:			
Add	dress:				
City:					
Home Phone:		Work Phone:			
Family Doctor:		Doctor's Phone:			
Care Card #:		Email Address:			
Present church attending:		_Musical Instrument he plays:			
Pre	esent school attending:	<u>_</u>			
Do	you prefer to be contacted by: Phone $\square$	Email	(Please check	one)	
1.	Please list any physical limitations, medical allergies or any special medical treatment procedures which this Cadet may require.				
2.					
3.	I/we shall not hold the Cadet Counselor, Junior Counselors and any other cadets liable for the spread of COVID. Drinks and snacks will be carefully distributed but I/we understand there will be some sharing of craft tools, sport items, and other various activities.				
4.	I/we do hereby give my/our son permission to attend and participate in the various activities, associated activities and functions performed by the New West Cadet Club #0930 of the Fraser Valley Council of the Calvinist Cadet Corps. I/we also understand that in case of accident or injury to my/our son, neither the Calvinist Cadet Corps, the Fraser Valley Council, the New West Cadet Club #0930 or the Counselors will be held liable.				
5.	I hereby agree to allow pictures of my son to be on the Cade	t website	Yes □	No 🗆	
Clu	e signing of this form will cover any and all Cadet Club ac ub #0930. eque is payable to: <u>New West Cadets</u>	tivities while yo	ur child is enro	lled in the New West Cadet	
Signed:		_(Parent or guardian)			
Da	te:		mby N	Mr. Salary M. Ji	
	nount Due: \$30.00 Cash/Cheque (circle one) or \$25.00 each for 2 or more boys from the same fam	nily.		OUNIDED	

## **Theme: Rooted and Grounded**

"And I pray that you, being rooted and established in love, may have power, ... to grasp how wide and long and high and deep is the love of Christ." Ephesians 3:17-18