

# NZTS FAMILY CAMP, SUMMER 2010

## Registration form

**Date:** Friday 22 October – Monday 25 October

**Venue:** Green Pastures Camp -527 Rapanui Road, Wanganui  
(This is 50m before Basin Botanical Gardens)

**Cost:** ( per person ) \$ 85.00

\$60.00 deposit (non- refundable) to be paid with registration.  
Food and materials \$25.00 to be paid on arrival.

### Attendee Details

Please fill in name (and age if under 18yrs)

1 \_\_\_\_\_ Age \_\_\_\_\_

2 \_\_\_\_\_ Age \_\_\_\_\_

3 \_\_\_\_\_ Age \_\_\_\_\_

4 \_\_\_\_\_ Age \_\_\_\_\_

5 \_\_\_\_\_ Age \_\_\_\_\_

### Contact Details

**Address:**

**Phone:**

**Email:**

## **Disclaimer/Indemnity form**

**Please read carefully. Payment to attend camps is acceptance that the disclaimer has been read and understood**

**Terms and Conditions:** The Theosophical Society in New Zealand has given permission for this event on the condition that I release and indemnify them from any liabilities, claims, losses, damages or expenses whatsoever including any liability under the health and safety employment act 1992. I understand that participating in this camp involves a number of risks. In entering this camp I confirm that all persons named on this registration form are physically fit and do not suffer from any medical condition, disability or lack of skill which would render them unsuitable to participate.

By registering for TSNZ Family Camp I expressly accept all risks personally to all persons named on this registration form and release the organizers and landowners and other persons involved in the event from liability, claims, damages, expenses caused by the event, including but not limited to any personal injury or death, any emotional or nervous disorders, any medical condition, any loss or damage to property.

Signed \_\_\_\_\_

Date / /2010

Full Name (please print clearly)

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Amount enclosed \_\_\_\_\_

Return to or 12a Oturi Road, Waverley, 4510  
ph 06 3466141  
[chookrun@xnet.co.nz](mailto:chookrun@xnet.co.nz)