Catch The Flava Sp. z o.o.
Warszawska 3/9 street
31-155 Kraków

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CARE RESIGNATION FORM

READ THIS FIRST:
Please complete the card in CAPITAL letters. Every underage Catch The Flava Camp participant has assigned camp tutor who watches over the safety of the participant. To cancel this care, the participant must submit this form completed and signed by both the parent (or legal guardian), and by own adult guardian residing on campus. Scan of the form must be sent electronically no later than July 10, 2017 at the address info@catchtheflava.com, and the original document should be given to staff members on the first day of the camp during check-in.

TO BE FILLED IN BY THE PARENT:

I : _____ a holder of ID document: _____
first and last name of the parent or legal guardian — type of the document and it's serial number

I declare that I am ❑ **A PARENT** / ❑ **A LEGAL GUARDIAN**

of Catch The Flava Camp 2017 participant: _____
first and last name of the participant

and I accept that my child during the above-mentioned camp, from July 23 - 30, 2017 will be under care of:

_____ a holder of ID document: _____
Camp Guardian's first and last name — type of the document and it's serial number

I release the Catch The Flava Camp Organizers of the responsibility for taking care of my child within the aforementioned period.

……..……..…. ……..……..……
city and date — Parent's / Guardian's signature

TO BE FILLED IN BY AN ADULT GUARDIAN WHO TAKES THE RESPONSIBILITY:

I : _____ a holder of ID document: _____
first and last name of the parent or legal guardian — type of the document and it's serial number

I declare that at the request and with the consent of: _____
parent's first and last name

during Catch The Flava Camp event, from July 23 - 30, 2017, I take under my care and bear full responsibility

for: _____
participant's first and last name

……..……..…… ……..……..……
city and date — Guardian's signature