

3. Information about child's parents

- Father's surname|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|
- Father's first name|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|
- Telephone numbers: mobile phone:
- home phone:..... business phone:
- e-mail:
- Mother's surname |.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|
- Mother's first name |.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|
- Telephone numbers: mobile phone:
- home phone:, business phone.....:
- e-mail:

4. Child's general health

4.1. Assessment by parents/guardians

- Medical history (infectious diseases/asthma/epilepsy/diabetes/other).
.....
.....
.....
- Other conditions (faintness/headaches/breathlessness/tiredness/anxiety/hearing deficit/learning disorders/dyslexia/dysgraphia/other).....
.....
.....
- Allergies to medications/food/dust/other allergies, please describe reaction:
.....
.....
.....
- Has the child been vaccinated against tetanus? When?.....
.....
- Other vaccinations (please list)
.....
.....
.....
- Blood type.....

- The child wears contact lenses? Is the child on medication? If so, what medication is it? Provide instructions regarding administration:
-
-
-

If the child is on medication, the child’s parents/guardians are responsible for supplying it.

- Does the child suffer from motion sickness? yes/no.....
 - Other important information regarding the child’s general health.....
-
-
-
-

In case of life threat to my child I agree to the child’s hospitalization, diagnostics and operations. I hereby declare that I have provided all the information that I possess on the child’s health in order to help ensure proper healthcare during the stay in the holiday centre. In the case of concealing the fact of a chronic disease and not providing the child with adequate medicaments, I shall be obliged to cover the costs of healthcare and purchased medicaments. In the case of not providing comprehensive information on the problems of the child that could affect the child’s ability to function in the environment (phobias, mental disorders, etc.) I agree to early termination of the stay of the child at the camp and to the child’s return at the cost of parents/custodial parents.

.....

place and date

legible signatures of parents

4.2. Assessment of child’s general health completed by a family doctor or paediatrician

.....

.....

.....

After performing a medical examination I certify that I have not discovered any conditions that would exclude (*full name of participant*) from participating in the Polish language camp in Krakow. She/he can participate in sports activities and hiking trips.

Instructions for the teacher guardian:

.....

Instructions for medical staff:.....

.....

.....

Signature and stamp

5. Additional information about the child

- Is the child a vegetarian? yes no
- Can the child swim? yes no
- Other important information that can be helpful in providing the child with the best possible care:
-
-
-

6. Home-group teacher/year-level coordinator recommendation

.....
School stamp

.....
.....
.....
.....
.....
.....
.....
.....
.....

.....
Place and date

.....
signature

7. Code of conduct (appendix 1.)

I confirm that I am acquainted with the content of the Rules and Regulations, I accept and I am obliged to abide by the above provisions.

.....
legible signature of participant

.....
legible signatures of parents

8. Required documents to be in possession of the child

- Passport with an expiry date later than the end-of-camp date

- International Student Identity Card (ISIC) (to be eligible for student fees and discounts)
- Vaccinations record (if available)
- Insurance (health insurance)

9. Information regarding transportation after arrival in Poland

▪ Arrival in Camp location

- The child will be delivered by (name and surname).....
 (address).....
 (contact no.)

- I would like my child to be picked up by a School representative and transported to the camp location for the additional fee.
- from the Krakow-Balice Airport (100 PLN)
 - from the Krakow's main railway/bus station (50 PLN)

▪ Departure from Camp location

- The child who is under 15 years old will be collected by parents or guardians entitled in the power of proxy (appendix 2).

The child who is over 15 years old

- will be collected by parents or guardians entitled in the power of proxy (appendix 2).
- the transport will be organized by the School for the additional fee:
- to the Krakow-Balice Airport (100 PLN)
 - from the Krakow's main railway/bus station (50 PLN)

.....
 legible signatures of parents

Information concerning the transport arrangements by the Jagiellonian University School of Polish Language and Culture should be provided at least two weeks in advance. In the case of irregular transportation date (prior to the camp start, after the camp termination or at night hours), the possibility of transport arrangement and the price shall be agreed individually.

10. Information regarding enrollment and camp fees

- 10.1. **Deadline for applying is 31st May or until there are places available. Enrollment is limited.**
- 10.2. **Camp fee is 3,260 PLN. It includes Polish language course, prepayment, tourist program, accommodation in a double room with bathroom, full board, 24-hour supervision by qualified education professionals.**
- 10.3. **In order to enroll in the camp it is necessary to fill out the application form and make the non-refundable prepayment of 300 PLN.**
- 10.4. **The remaining fee of 2,960 PLN must be paid no later than 30th June 2013 to School's bank account:**

Account name: **Uniwersytet Jagielloński, Szkoła Letnia**

Account number: **30 1240 4722 1111 0000 4859 4101**

At: **Bank Pekao S.A.**

1 Pijarska Str.

31-015 Krakow

Title: **Szkoła Letnia UJ, camp for youth [*name of the participant*]**

IBAN: **PL 30 1240 4722 1111 0000 4859 4101**

BIC (SWIFT): **PKO PPL PW**

- 10.5. **No refund will be considered if the child is withdrawn from the camp after its commencement on 6 July 2014.**

.....
Date legible signatures of parents

11. How did you learn about the Camp?.....
.....
.....

12. Declaration

I hereby declare that all the information provided by me is true and correct to the best of my knowledge. I accept all the rules and regulations regarding the Summer Polish Language Camp for Youth in Krakow.

.....
Date legible signatures of parents

.....
legible signature of participant

Appendix no. 1

Rules and Regulations of the "Explorers' Summer" Holiday Camp

1. Camp participants have the following rights:
 - to notify the teachers and the camp manager about claims and failures in the organization and running of the summer camp,
 - to use sports facilities and sports equipment only upon a consent and in the presence of an instructor and teacher,
 - to leave the camp area temporarily only upon a written declaration provided by parents or guardians indicating a person authorized to take care and responsibility of the camp participant (appendix no. 4),
 - to notify the teacher about any problems,
 - to take part in a holy mass after having informed the camp manager or teacher about such an intent.

2. Camp participants shall abide by the following rules:
 - rules and regulations of the camp facility during the camp,
 - provisions of the Rules and Regulations,
 - orders of the camp manager, teachers and lecturers,
 - fire-safety regulations, and
 - traffic regulations.

3. Camp participants are obliged to as follows:
 - to abide by orders of the camp manager and teachers,
 - to respect the colleagues, teachers, lecturers and other persons,
 - to take care of personal hygiene and cleanliness in the camp,
 - to immediately notify the teacher about any sickness, general disorders and any other noticed irregularities, in particular with respect to health or life risk,
 - to participate in all the events organized within the framework of the language camp and to abide by the daily schedule, and

4. During the entire camp, from the arrival to the departure, participants are strictly prohibited as follows:
 - to drink alcohol or power drinks,
 - to smoke,
 - to use additives (drugs),
 - to use offensive language or gestures,
 - to leave the camp area or the didactic classes, or
 - to have sexual intercourse.

5. The costs of potential damage caused by participants shall be incurred by the participants' parents or guardians.
6. Each breach of the Rules and Regulations shall result in the punishment of the participant with admonition or reprimand.
7. In the case of serious breach participants may be expelled from the camp upon a notification of parents. Parents of the expelled participant are obliged to take the participant in person at their cost; the camp fee shall not be refunded in such a case.
8. Neither the School of Polish Language and Culture of the Jagiellonian University nor the teachers taking care of the camp participants shall bear any responsibility for valuables owned by the participants (cash, mobile phones, cd or mp3 players, computers, e-games, documents etc.).
9. I confirm that I am acquainted with the content of the Rules and Regulations, I accept and I am obliged to abide by the above provisions.

.....
Legible signature of the participant

.....
Legible signatures of parents/guardians

Appendix no. 2

Power of proxy to pick up the camp participant after the camp termination

We, the undersigned parents/guardians of

.....
(name and surname of the camp participant)

hereby give this power of proxy to Mr./Ms.

.....
(name and surname of a person authorized to pick up the child)

holder of

.....,
(no. and series of ID card/passport)

address,

phone no. of a person authorized to pick up the child on behalf of parents
.....,

to pick up the camp participant upon the camp termination. The person indicated in this document shall take care of the child on our behalf.

.....
(place and date)

.....
(legible signatures of parents/guardians)

Declaration*

I hereby declare that pursuant to the will of parents/guardians of

.....
(name and surname of the child)

I will take care and responsibility over the child after the camp termination and I am obliged to ensure the safety of the child.

.....
(place, date, time)

.....
(legible signature of the person taking over the care and responsibility over the child)

*to be filled in by the person indicated by parents/guardians at the time of taking over the care and responsibility over the child

Appendix no. 3

Authorization to take the child to the airport/station after the camp termination*

We, the undersigned parents/guardians of

.....
(name and surname of the camp participant)

authorize a representative of the School of Polish Language and Culture of the Jagiellonian University to take our child to the airport/station after the camp termination and to walk the child to the passenger departure lounge or to train/coach station.

At the same time we declare that we are aware that the responsibility of the School of Polish Language and Culture of the Jagiellonian University over the camp participant extincts, in the case of air transportation, at the time of the child passing through the control gates where individuals without an air ticket are not admitted, and in the case of rail/coach transportation - at the moment the child gets on the train/coach.

We hereby declare that as parents/guardians we are solely responsible for the child during the return travel.

.....
(place and date)

.....
(legible signatures of parents/guardians)

- applicable **only** to participants over 15 years old

Appendix no. 4

Power of proxy to take over temporary care of the child during the camp*

We, the undersigned parents/guardians of

.....
(name and surname of the camp participant)

give this power of proxy to Mr./Ms.

.....,
(name and surname of a person authorized to pick up the child)

holder of

.....,
(no. and series of ID card/passport)

address

phone no. of a person taking over the care over the child on behalf of parents
.....,

to take over temporary care of our child during the camp. The person indicated in this document shall take care of the child on our behalf.

.....
(place and date)

.....
(legible signatures of parents/guardians)

Declaration**

I hereby declare that pursuant to the will of parents/guardians of

.....
(name and surname of the child)

I shall take over temporary care over the child during the camp. I undertake to ensure the child's safety and to return with the child to the camp premises by [hour] of [date]

.....
(place, date, time)

.....
(legible signature of the person taking over the care and responsibility of the child)

*applicable to all the participants

**to be filled in by the person indicated by parents/guardians at the time of taking over the care and responsibility over the child