



Fraser Valley Aboriginal Children and Family Services Society-Xyolhemeylh



110-3010 Gladwin Rd, Abbotsford, BC, V2T 0H5
Telephone: (604) 855-3328 Fax: (604) 855-3361

Visions and Voices – YOUTH FORUM SEPT 20-22 Registration Form – AGES 12-19

Location: Zajac Ranch, Mission

Registrations to be sent to visionsandvoices@xyolhemeylh.bc.ca

Registration is required by Aug 19th

GUIDELINES FOR ATTENDING THE EVENT: (More info will be shared closer to the event)

- This is an overnight camp Friday Evening- Sunday Afternoon. Participants will need to bring a pillow and blanket/sleeping bag. We are staying in a lodge with bunk beds. Each room will be chaperoned by a staff. A helpful packing list will be sent closer to the event
- There is absolutely no smoking, vaping, drugs, alcohol or weapons permitted on the premises.
- It is recommended for youth to leave their electronics/cellphones at home as we are not responsible for lost devices.

Participant Information:

NAME (FIRST AND LAST):	AGE:	GENDER:	PRONOUNS:
YOUTH PHONE NUMBER: (If applicable)	YOUTH EMAIL ADDRESS:		
ADDRESS:	CITY:	Is transportation Needed? (Transportation is limited)	
HOODIE SIZE: (Adult Unisex Sizes)	TSHIRT SIZE: (Adult Unisex Size)		
SOCIAL WORKER NAME:	SOCIAL WORKER PHONE NUMBER:		
MEDICATIONS:	Medication instructions (Can the youth take on their own? Do they need reminders? What time are medications given?) Medications will be locked and stored with Chaperones except inhalers etc.		
ALLERGIES/MEDICAL CONCERNS/FOOD RESTRICTIONS:			
Additional info or behaviours Facilitator or Staff should be aware of:			



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Caregiver/Primary Emergency Contact Information:

NAME:	PHONE NUMBER:	EMAIL:
ADDRESS:		RELATIONSHIP TO PARTICIPANT:

Please list a secondary Emergency contact in case the first one is unavailable.

Secondary Emergency Contact Information:

NAME:	PHONE NUMBER:	RELATIONSHIP TO PARTICIPANT :
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Waiver/Release:

Participant agrees to follow all reasonable instructions and directions of the staff duly appointed by Fraser Valley Aboriginal Children and Family Services Society-Xyolhemeylh in connection with the operation of the above named event.

I hereby release, remise and forever discharge the Fraser Valley Aboriginal Children and Family Services Society-Xyolhemeylh, its agents or volunteers, of and from all manner of action, cause of actions, claims and demands of whatever nature which result from any accidental injury, loss or expense sustained, arising out of or in any way connected with participation in any program or attendance at any location operated by the Fraser Valley Aboriginal Children and Family Services Society-Xyolhemeylh.

In the event a participant is injured, ill or in need of medical attention, I authorize the Fraser Valley Children and Family Services Society-Xyolhemeylh staff to seek medical attention on my behalf.

Signature: _____ **Date:** _____



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Visions and Voices Forum Code of Conduct

This form must be signed and dated by the participant and is designed to help participants understand expectations of the event.

I, _____ agree to abide by the following:

1. I will be kind and respectful to other participants and staff. I will listen and follow staff directions.
2. I will not act in any way that may harm a participant's feelings or hurt them physically, either intentionally or accidentally
3. I will not smoke, use any alcohol or drugs other than medication prescribed to me by a doctor while at the forum. I understand this is a substance free event.
4. I will not bring any weapons or objects that may be used as weapons.
5. I will try my best to participate in activities and discussions
6. I will not bring valuables or electronics to camp. If I choose to bring a cellphone I understand it is my responsibility if it is lost or stolen.
7. I understand that if I do not follow the Visions and Voices Forum code of conduct I will be required to leave
8. I understand that I can go to a staff or Visions and Voices leader if I have concerns or questions.

I _____, the participant, have read, understand, and accept the above expectations of the Visions and Voices Leadership Program

Signature of Youth Registering _____

Date: _____