



CONSENT & WAIVER FORM

CANADA SUMMER CAMP 2026

Student Information:

Family Name:

Gender:

Given Name:

Passport Number:

Date of Birth
(DD/MM/YYYY):

Nationality:

Parent/Guardian Information

Name:

Relationship:

Phone

A. Medical Consent

I authorize the Youth Leader Camp staff to provide or arrange medical treatment if necessary, including emergency care.

B. Activity Consent

I allow my child to participate in all camp activities, including indoor and outdoor events, city tours, sports, and excursions.

C. Liability Waiver

I understand that while all safety protocols will be followed, the camp organizers are not responsible for injuries or losses beyond their control.

D. Media Release

I agree / do not agree (circle one) to allow the camp to use photos/videos of my child for non-commercial educational or promotional purposes.

E. Behaviour Agreement

I confirm that my child will follow all camp rules and instructions.

Parent/Guardian Signature: _____

Date: _____

int.campcanada@gmail.com



FLIGHT INFORMATION SHEET

Student Information:

Family Name:	<input type="text"/>	Gender:	<input type="text"/>
Given Name:	<input type="text"/>	Passport Number:	<input type="text"/>
Date of Birth (DD/MM/YYYY):	<input type="text"/>	Nationality:	<input type="text"/>

Arrival Flight

- Airline: _____
- Flight number: _____
- Departure airport: _____
- Arrival airport (Toronto): _____
- Arrival date & time: _____

Departure Flight

- Airline: _____
- Flight number: _____
- Departure date & time: _____

Special requests (if any): _____

Parent/Guardian Signature: _____

Date: _____

int.campcanada@gmail.com



Application Form

1. PROGRAM & AGENT INFORMATION

1.1. Program selection

Youth Leader Camp – 2 weeks

Youth Leader Camp – 3 weeks

Preferred start date

14.06.2026

21.06.2026

28.06.2026

05.07.2026

12.07.2026

19.07.2026

1.2. Agent information

Agency name: _____

Email: _____

Phone / WhatsApp: _____

4. ACADEMIC & LANGUAGE BACKGROUND

Current English level :

Beginner

Elementary

Pre-Intermediate

Intermediate

Upper-Intermediate

Advanced

English certificates (if any):

IELTS: Overall _____ Date: _____

TOEFL: Score _____ Date: _____

Other: _____

Student's strengths: _____

Student's interests: _____

Previous international experience:

Never

Yes. Please specify: _____



Application Form

2. STUDENT INFORMATION

Full name (as in passport): _____

Gender: Male Female

Date of birth: _____

Nationality: _____ Passport number: _____

Date of issue: _____ Date of expiry: _____

Current school: _____ Grade: _____

Student's email (if any): _____

Student's phone (if any): _____

Home address: _____

3. PARENT / GUARDIAN INFORMATION

Full name: _____

Relationship to student: Father Mother Guardian

Phone: _____ Email: _____

Occupation: _____

Emergency contact (if different from above)

Name: _____

Relationship: _____

Phone: _____



Application Form

5. HEALTH & SPECIAL NEEDS

General health condition

- Good
- Average
- Other

Does the student have any allergies?

- No
- Yes. Please specify:

Any chronic illness or medical condition?

- No
- Yes. Details:

Regular medication:

Special diet:

- Vegetarian
- No pork
- Other

Special needs (learning, behaviour, psychological...)

6. TRAVEL & ACCOMMODATION PREFERENCE

Travel arrangement

- Travel with group
- Travel individually
- Parents will accompany to Canada

Accommodation type

- Dormitory
- Homestay with local family
- Other



Application Form

7. PARENT / GUARDIAN DECLARATION

Please read carefully and tick to confirm:

- I confirm that all information in this application is true and correct.

- I understand that this is an application form only; the student's place will be confirmed upon payment and official Letter of Acceptance.

- I agree that my child will follow all camp rules and guidelines.

- I agree to sign the Consent & Waiver Form and Medical Form before departure.

Parent / Guardian full name: _____

Signature: _____

Date: _____ / _____ / _____