

Participant details:

## Zwem- en Waterpolovereniging Argo

Sint-Oedenrode - Founded May 2, 1968 - Affiliated with the KNZB

Argokamp registration form: May 24-26, 2024

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First name:	 and
Infix:	 Se V3
Last name:	 N.P
Address:	 a both
Date of birth:	
Phone number:	 KIE
Health declaration:	
Ziekteverzekering Name:	
Number:	 
<b>Doctor</b> Name:	
Phone number:	
In case of an emergency Name:	
Phone number:	

Do you suffer from asthma, hay fever, eczema, epilepsy or other complaints which we need to know? **Yes / No,** If yes which one?

Are you taking medications that we should be aware of? **Yes / No,** If yes which one?

## Tent

I have a tent **Yes / No** and it can accommodate\_\_\_\_\_ people.

## Help

This year we really need the help of parents/guardians. Would you please let us know when you can help?

- $_{\odot}$   $\,$  I can help with construction on Friday, May 24 between 3:00 PM and 5:00 PM
- $\circ~$  I can help with construction on Friday, May 24 between 5:00 PM and 7:00 PM
- $_{\odot}$   $\,$  I can help with dismantling and tidying up on Sunday, May 26 between 10:00 AM and 12 noon