



International Leo Youth Camp for Blinds 2020

Registration form

First name	
Second name	
Date of birth	
Full Address	
Country	
E-Mail	
Mobile number	
Mobile number of contact person (e.g. parentens)	
Allergies	
Special eating habits (e.g. vegetarian, lactose intolerance)	
Visual faculty / mental-health impairment	
T-Shirt Size (S, M, L, XL, XXL)	
Ability to swim?	
Guide dog?	
Participated in earlier camp?	
Preferred roommate (name)	

(Date)

(Signature participant)