

## **Interest in a children's camp for the affected child and/or sibling**

### **For which children's camp would you like to register?**

Sailing trip on the Baltic Sea

Young Adults Camp in Wartaweil at Lake Ammersee

Camp for children and adolescents with neuromuscular diseases at the Irmengard-Hof at Lake Chiemsee

Camp for blind and visually impaired children in Niederpöcking at Lake Starnberg

### **Personal data of the child:**

First Name, Last Name:

Date of Birth:

Address:

Postal Code and City:

Phone Number:

E-mail Address:

Diagnosis:

Date of Initial Diagnosis:

Main Impairments:

### **Personal data of Sibling(s):**

First Name, Last Name:

Date of Birth:

Address:

Postal Code and City:

Phone Number:

E-mail Address:

How did you hear about Kindness for Kids?

Additional Comments/Remarks/Requests:

Date and Signature of the parents: