

# Zainab Family Camp Registration-CAMP 2009

**Date: Friday, June 12th–Sunday, June 14th, 2009**

**Time: Friday 4:00pm-Sunday, 4:00pm**

**Place: Camp Killoqua, 15207 East , Lake Goodwin rd,  
Stanwood, WA 98292**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_

## Members of Family Attending Camp

1. Name \_\_\_\_\_ Gender: M/F Age: 0-6 yrs  ; 6-12 yrs  ; 12+

2. Name \_\_\_\_\_ Gender: M/F Age: 0-6 yrs  ; 6-12 yrs  ; 12+

3. Name \_\_\_\_\_ Gender: M/F Age: 0-6 yrs  ; 6-12 yrs  ; 12+

4. Name \_\_\_\_\_ Gender: M/F Age: 0-6 yrs  ; 6-12 yrs  ; 12+

5. Name \_\_\_\_\_ Gender: M/F Age: 0-6 yrs  ; 6-12 yrs  ; 12+

6. Name \_\_\_\_\_ Gender: M/F Age: 0-6 yrs  ; 6-12 yrs  ; 12+

## COSTS

Ages 0-6 years: FREE

Ages 6-12 years: \$35

Ages: 12+ years: \$55

Please submit this form to Camp Organizers by Thursday, May 14th, 2009.

After May 14th, the price will go up to \$70/ person without exception

Contact: Shama Chaudhry: 206-253-1850; Br. Taghi Gozlo at (206) 546-6100 ; Br. Ali Rizvi (206) 235-7455 ; Sr. Zahra Abidi (425)823-5823

# Zainab Family Camp

Zainab camp committee is committed to providing halal fun to all the members of the community. The goal is to make the camp experience spiritually, socially and physically enjoyable. In doing so we adhere to a strict Islamic code by providing halal food and making sure that the camp site selected offers privacy. Because of food restrictions, we need to have an accurate count of participants else we are unable to make timely arrangements. Our policy of supporting hijab is a major reason why we select camp sites that limit other groups from using the camp facility while our camp is in session.

The camp committee would request the community members participating in Zainab camp to appreciate our limitations and cooperate with us. Timely submission of forms would enable us to purchase food and other items at bulk rates. For late submissions, we have no choice but to charge a higher amount due to higher incremental costs that are incurred.

We would also like to encourage momineen to offer suggestions regarding food, camp activities and games. Your cooperation and assistance will be much appreciated. Thank you.

*Wasalaam,  
Zainab Camp Committee*

Suggestions:

Breakfast: Games/ Activities (Kids):

lunch: Games/ Activities (Adults):

Dinner: Other:

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## Waiver of liability

I, the undersigned, release from all liability and agree not to take any legal action against Zainab Organization of Greater Seattle, its office bearers, teachers and volunteers involved in camp activities, for any personal injury, death, property damages, expenses or loss sustained by me or minors in my care as a result of participation in camp activities. This includes any cause whatsoever including, without limitation, negligence, on the part of Zainab Director, Position Holders, Teachers and Volunteers.

I agree that I will be responsible to pay for all or costs relating to special services provided by Zainab Organization or its Volunteers if such special services are requested or required by me or minors under my care.

I agree that I will be responsible for and I will pay all or any costs relating rescues, ambulance, special travel, medical attention, police services, or any other special outlay requested or required by me or minors under my care.

I acknowledge that the enjoyment and excitement of the activities are derived in part from travel to and in wilderness environments, remote places, camping, hiking and water activities and that the inherent risks of these activities contribute to such enjoyment and excitement.

I confirm that I am the full age of maturity and am the parent or guardian of the minors named in this form.

I confirm that I have read and have understood this agreement prior to signing it.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date