

APPLICATION / DECLARATION

***ESC* Eclectic Survival Camp** **SRB-11000 Belgrade**

First Name Last name

Date and place of birth:

Address:

Country:

Tel/Fax:

e-mail:

ID number

I hereby confirm that I voluntary participate in ESC-Camp and that I am familiar with camp activities.

I am healthy and capable of staying in the nature and I take full responsibility for acts which are not in accordance with instructions. During my stay in the camp I will follow the rules and agreements with instructors.

For ESC

Participant

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Place and date