



Ogichi Daa Kwe
 3515 Michigan Avenue
 Cincinnati, OH 45208
www.ogichi.org
 Phone: (513) 772-7479
 Fax (513) 772-5673

**STATISTICAL & EMERGENCY
 INFORMATION**

MAIL TO THE OFFICE BY MAY 15, 2009

(required for Canadian and U.S. Customs and Immigration, fishing licenses, emergencies)

Full Name: _____ Birthplace: _____

U.S Citizen (circle one): Yes No

Date of Birth: _____ Color of Eyes: _____

Height: _____ Weight: _____ Color of Hair: _____

Religion: _____ Blood type (if known): _____

Father's full name: _____ Birthplace: _____

IN CASE OF EMERGENCY, whom should we call?

Name	Home Phone	Work Phone	Cell Phone
Parent/Guardian _____	_____	_____	_____
Parent/Guardian _____	_____	_____	_____
Contact Person _____	_____	_____	_____
Relationship to camper _____			
Contact Person _____	_____	_____	_____
Relationship to camper _____			

Parents' vacation address: (If you expect to be away from home)

From: _____ To: _____ Phone: _____

Our address will be: _____

Please attach a **photograph** of your daughter here, **which has been signed by a parent/guardian**. Your daughter will not be able to enter Canada without this.

PERMISSION TO ENTER CANADA

"My daughter/ward, named above has my permission to enter Canada during the months of June, July, and August, under the leadership of staff people employed by the Camping and Education Foundation and Ogichi Daa Kwe".

Parent/Guardian: _____

Date: _____

Sign directly on the front of this photograph

**PLEASE SEND A PHOTOCOPY OF YOUR DAUGHTER'S PASSPORT &
 BIRTH CERTIFICATE WITH THIS FORM.**