



Katuwaq Healthy Family Retreat Application 2026

Applications are due by Tuesday June 30th @ 5pm. Priority will be given to applicants with children. Applications received after the deadline will be considered on a case by case basis.

PARTICIPANT INFORMATION

Last Name _____ First Name _____ Age _____ Grade _____

PARENT/GUARDIAN INFORMATION

Last Name _____ First Name _____ E-mail _____

Phone number _____ Work number _____ Cell _____

Have you been to Nuuciq/Nuchek before? _____ If yes, what years? _____

Family Information

Last Name _____ First Name _____ Age _____

Last Name _____ First Name _____ Age _____

Last Name _____ First Name _____ Age _____

Last Name _____ First Name _____ Age _____

Last Name _____ First Name _____ Age _____

Last Name _____ First Name _____ Age _____

Where will you volunteer? (Everyone must work to help out at camp, select 3)

____ Cooking ____ Dishes/Cleanup ____ Hunting ____ Fishing ____ Steam bath Fire ____ Camp Cleanup

____ Storytelling ____ Steam bath wood cutting

EMERGENCY CONTACT INFORMATION

Emergency Contact _____ Emergency Contact Number _____

Sessions

Please rank the sessions in order of preference that you wish to attend. Session availability varies depending on travel logistics.

____ Session 1: July 21st – July 24th, 2026 ____ Session 2: July 23rd– July, 26th 2026

General Medical History (Confidential)

Name: _____

Limitations & Special Requirements: _____

Other Health Concerns: _____

Name: _____

Limitations & Special Requirements: _____

Other Health Concerns: _____

Name: _____

Limitations & Special Requirements: _____

Other Health Concerns: _____

Name: _____

Limitations & Special Requirements: _____

Other Health Concerns: _____

Name: _____

Limitations & Special Requirements: _____

Other Health Concerns: _____

Media Release

Yes, I do give permission ____ No, I do not give permission ____

I allow me and my child(ren) to be photographed and videotaped during the Katuwaq Healthy Family Retreat. I give permission to the Native Village of Eyak to publish on the Youth, ICC and NVE Facebook pages and/or printed for use in publication and/or advertisement for NVE. I'm aware the media content would not include my child's name.

Transportation Release

Yes, I do give permission ____ No, I do not give permission ____

I allow me and my child(ren) to be transported during the Katuwaq Healthy Family Retreat. I understand that transportation includes watercraft. I'm aware the driver will be insured and licensed. If an emergency would arise, I will be notified as soon as possible.

Liability Waiver

This health history is true and accurate as far as I know. I understand that reasonable measures will be taken to safeguard the health and safety of the child and I will be notified as soon as possible in case of emergency. In case of sickness or accident, I hereby give my consent for emergency medical treatment as necessary under the circumstances. Should medical attention be required, I hereby assume responsibility for any expenses incurred.

On behalf of the child and his/her heirs, successors, representatives and assigns, I hereby release the Native Village of Eyak, its employees, officers, volunteers and agents from any and all liability, loss, damage, cost, claims or causes of action including bodily injury, illness or death, or property damage which me or the Child(ren) incurs during travel to and from and/or participation in NVE Travel, excluding liability that arising out of the willful negligence or intentional acts of The Native Village of Eyak. I further agree to defend, indemnify, and hold harmless the Native Village of Eyak and its officers, employees, volunteers, and agents from any and all claims, damages, losses, liabilities or expenses (including but not limited to reasonable legal, consulting and other fees) (the Claims and Liabilities) which may be asserted against, The Native Village of Eyak, its officers, employees, volunteers and agents, and which arise out of or result from the me and my Child(ren)'s participation in the Native Village of Eyak; provided however that such obligation shall not apply to any claims and liabilities resulting from the willful negligence or intentional acts of The Native Village of Eyak.

Parent or Guardian signature _____ Date _____

Parent or Guardian signature _____ Date _____

Adult (18) Child signature _____ Date _____

Family Participation & Chore Sign Up

Katuwaq Camp is a shared community experience, and all participating families are expected to contribute to the daily operations of camp. Please indicate your willingness to assist with the following responsibilities. Specific schedules and assignments will be finalized and shared prior to departure.

Chore Opportunities (check all that apply):

- Cooking (breakfast, lunch, and/or dinner)
 - Cleaning the dining hall
 - Dishwashing
 - Cleaning restrooms

Note: Cooking days and responsibilities will be assigned closer to departure once the final schedule is confirmed.

Cultural Teaching & Class Facilitation

We encourage families to share knowledge, skills, and traditions that strengthen our community and cultural connections. If you or a member of your family are interested in leading a class or activity, please indicate below:

I/We are interested in leading a class or activity:

- Yes
- No

If yes, please describe the class or activity you would like to offer:

Examples may include: Local flora identification, Language lessons, Beading or traditional crafts/teachings or storytelling