



# Somebody's Son

Participant Application

September 09-16, 2023

**Location: Baker Lake**

Please read carefully and complete as much as possible.

Full name	
Mailing Address	
Community	
Date of Birth/age	
Phone #	Cell#
Email address:	
NLCA Beneficiary Number	

Inuktitut will be the language of instruction. How well do you understand/speak Inuktitut?  
Please explain:

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Name of emergency contact person:	
Address & contact #	

If you have any medical issues & conditions including allergies; please inform us so we can be aware in case of any emergencies:



The mission of the Somebody's Son camp is ***to care for and respect others, to consider the safety of self and all others, to have acceptance and tolerance of co-participants, and to be open to lifelong learning:***

***Furthermore I, \_\_\_\_\_ will take responsibility for my own actions and***  
(Print name)

***accept the consequences of my behavior if I do not respect the rules of the camp.***

If you agree with this mission & statement, please sign your name below:

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

Please deliver your completed application form to your local KIA Community Liaison Officer or directly to KIA at:

Kivalliq Inuit Association

32-4 Sivulliq Avenue

Rankin Inlet, NU

Fax: 1-867-645-2348

Email: Samantha Tugak-Brown [programs@kivalliginuit.ca](mailto:programs@kivalliginuit.ca)

If you have any questions or concerns, please contact Christine Tootoo at 867-645-5740 or toll free at 1-800-220-6581.

**Deadline to apply is Friday, August 18 at 5:00 p.m. CST**

**\*\*Only selected applicants will be notified by letter of acceptance\*\***