



Family Camp (all ages, parent(s) on-site)
(July 7-10, 2022): \$300/family

Name: _____ Boy Girl Adult: __ Child: __ Age: __

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Address: _____ City/Province: _____ Postal Code: _____

Family Faith Base: _____ Parish/Location: _____

Parent/Guardian information

Name: _____ Email: _____

Telephone (#1): _____ Telephone (#2): _____

Name: _____ Email: _____

Telephone (#1): _____ Telephone (#2): _____

Health Information

Health Card Numbers: _____

Family Doctor Name: _____ Phone number: _____

Allergies: _____

Medical Requirements: _____

Dietary Concerns/Restrictions: _____

Although we cannot guarantee an allergen free environment, we will make every effort to accommodate children with severe allergies.

Does your child have needs, which will require particular attention during their time at camp? Please check:

Physical Limitation Social or emotional difficulty Behavioural needs

Please include a brief explanation: _____



Medication Policy and Release

All medication (except inhalers and EpiPen's), must be submitted to the camp upon arrival at camp. Medication must be in the original bottle or packaging. Camp staff administering medication are certified in Standard First Aid, but are not health care professionals. The nearest hospital is 30 minutes away by car. NO medication (including non-prescription) will be administered without verbal consent of a parent/guardian (along with written consent indicated below), unless under specific and individual order of a physician.

I/we have provided the following medications and give consent for them to be dispensed at the request/need of my/our child: _____, _____, _____, _____, _____.

In the event that **I/we are unavailable, I/we do hereby give consent** for all emergency medical care (including surgery, if deemed necessary and recommended by the attending physician(s) prescribed by a duly licensed physician for my child in the event of injury or illness during the above-named event/activity. This emergency medical care may be given under whatever conditions are deemed necessary, so as to preserve and protect life, limb, health and well-being of my child.

Media Release:

I/we understand that photos/videos will be taken during the event/activity/program and **I/we grant the Eparchy/ St. Michael's Camp or Parish mentioned above the following permissions** regarding any media taken by or for the organizers. **I/we further agree to release** the above mentioned, their photographer(s), offices, employees and designees from liability of any violation of personal or proprietary right **I/we** may have in connection with such use:

(Please initial the appropriate category, and approval or denial of name to appear with the media)

- unlimited use of all media in which my child appears, in any manner including digital/ online use. **Or,**
- use of media, in which my child appears, restricted to print or for hard copy display. **And,**
- I/we authorize** my child's name to be used in conjunction with media use above.
- I/we do not authorize** my child's name to be used in conjunction with the media use above.



Conditions of Enrollment: (to be reviewed with Camper)

- 1) **I/we understand** that the Camp Director reserves the right to dismiss a camper who in their opinion is a hazard to the safety and right of others, or who appears to have rejected the reasonable controls of camp. If this occurs, the fee is non-refundable. The parents or guardians in this case shall come to pick their child up at their own expense.
- 2) **I/we attest** that Provincial Health or equivalent medical insurance covers the camper.
- 3) **I/we** understand that, except in the case of minor illness, all attempts will be made to contact me regarding medical decisions and treatment (including camper age 16 to 18 minus one day) of my child/ward. However, I authorize camp staff to release the information on this form and approve emergency medical attention including hospitalization, anesthesia, surgery or injection of medication for the camper (or myself, if adult participant) when ordered by professional medical staff.
- 4) **I/we** will notify the camp in writing if any change occurs in the camper's health within 7 day prior to attending camp.
- 5) **I/we** understand that some activities are held off the main **St. Michael's Campsite**.
- 6) **I/we** have read this registration form with the camper and understand the conditions of enrolment and the cancellation policy and I agree to be responsible for the payment of all fees due to the camp.
- 7) **The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization and remains an on-going threat. I/we understand and accept the risk of the COVID-19 virus or other diseases my child(ren) may be exposed to while attending St. Michael's Camp, despite the precautions St. Michael's Camp has taken which were established in accordance with the local health authority directions and guidelines. Camper's participation in activities is voluntary and it is acknowledged that risks may include contraction or exposure to COVID-19 or any other contagious disease, and that any exposure or infection may result in personal injury, illness, disability or death.**
- 8) You may be eligible to receive funding to send your child to camp through generous sponsors, please inquire with **St. Michael's Camp** to fill out the application form for possible funding.

Initials: Parent/Guardian _____

Liability Release & Parent/Guardian Signature

In signing below, **I/we hereby also acknowledge** that:

1. I/we have read, understand the conditions of registration and affirm the accuracy of the information given, to the best of my knowledge, and affirm the consents provided herein;
2. I/we have read through the forgoing with our child, as appropriate, and they understand their obligation to adhere to camp rules;
3. Sufficient information has been provided by the event coordinators with respect to the planned activities, duration, location, method of transportation/sleeping arrangements (if applicable), participants and supervision;
4. **I/we** understand that **I am/we are** welcome to attend or drop in at any time during the event/activity/program.

I/we hereby waive, release and discharge any and all claims for damages for personal injury, property damages or which may hereafter occur to me as a result of participation in camp activities. This release is intended to discharge in advance The Ukrainian Catholic Episcopal Corp of Sask., St. Michael's Camp, Parishes, its Board of Directors, officials, officers, employees, volunteers and agents from liability, even though that liability may arise out of perceived negligence on the part of persons mentioned above. **I/we** agree to observe safety procedures and practices for camp activities at all times. It is understood that some recreational activities involve an element



of risk or danger of accidents and knowing those risks, **I/we** hereby assume those risks. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on **my/our** heirs and assignees. **I/we** give consent for my/our child to participate in all camp activities, and **I/we** execute the above liability release on their behalf, if under 18 years.

Name of Parent/Guardian *[Please Print]*

Signature of Parent/Guardian

Date (day/month/year)

Payment/Fees

- Cheque (payable to): **St. Michael's Camp**
- Cash
- Money Order (payable to): **St. Michael's Camp**
- E-Transfer; E-Transfer Confirmation # _____

***All E-transfers are to be sent to: camp@stmichaelscamp.com– please make the password summer2022**

Discounts Available

To ensure more families are able to go to camp, we are providing a few methods to have a discount:

1. \$50 discount for **EARLY BIRD REGISTRATION (registration received before May 1st, 2022)**
2. \$50 discount, if you've attended St. Michael's winter camp this year.
3. \$50 discount for new camper referral (upon confirmation that new camper successfully registers)
 - a. List name(s) of new camper referral (first time to St. Michael's Camp): _____, _____ (1 discount per camper, max \$50 total discount)

Total Fees: (\$) _____

Camper Drop-Off: 1PM on Thursday

Camper Pickup-Off: 1PM on Sunday

Camp is Located in BENITO subdivision, within Duck Mountain Provincial Park

Please submit form to: camp@stmichaelscamp.com or mail to *St. Michael's Camp, Box 128, Kamsack, Saskatchewan, S0A 1S0.*

Once the registration form is received you will be emailed a packing list. See you at camp!