



Camp Summit 2017

Family Camp Registration Package

September 22nd - 24th, 2017

Family Name: _____

Each of our Cabins sleeps 12 people maximum. Please Fill out the name and ages of the guests in your cabin below.

- 1) _____ (Age) _____
- 2) _____ (Age) _____
- 3) _____ (Age) _____
- 4) _____ (Age) _____
- 5) _____ (Age) _____
- 6) _____ (Age) _____

****CABIN SHARE:** Our Family Would like to share a cabin with the _____ Family.

Families that share a cabin with another family will each receive a \$50 discount to the final cost of the program

FAMILY CONTACT INFORMATION

Primary Contact Name: _____ Home Phone : _____
Email: _____ Cell Phone : _____
Family Mailing Address : _____
City: _____ Country: _____ Postal Code: _____

EMERGENCY CONTACT INFORMATION

Contact Name: _____ Home Phone : _____
Relationship: _____ Cell Phone : _____

How did you hear about Camp Summit? _____

Has your Family Attended Camp Summit Before? YES NO If Yes, which year is this for you at Camp? _____

Please Return Your Completed Registration To:

CAMP SUMMIT

PO BOX 48

Squamish-British Columbia-Canada

Email: jen@campsummit.ca Phone: (604)898-3700 Fax: (604)898-3708 www.campsummit.ca

Participant Acknowledgement of Risk 2017

Please Print the Names of those who will be attending and participating in Family Camp.

1) _____

7) _____

2) _____

8) _____

3) _____

9) _____

4) _____

10) _____

5) _____

11) _____

6) _____

12) _____

My family and I have read a description of the camp activities we are about to participate in and understand the hazards and risks of the intended activities related to the trip. Certain hazards and risks are inherent in camp activities and cannot be eliminated without destroying the unique character of the activities. These inherent risks are some of the same elements that contribute to the unique character of camp but can be the cause of destruction, loss or damage to equipment, personal property, personal injury, illness, suffering, or in extreme cases, permanent trauma or death.

Camp activities may take place in a wilderness environment and may include: rock and wall climbing, rappelling, bouldering, hiking, backpacking, high or low ropes course activities, swimming, whitewater rafting, sea kayaking, canoeing, mountain biking, archery, dog sledding, snow shoeing, snowboarding, downhill and cross country skiing, fire building and cooking, and camping in remote, wilderness areas in developed and undeveloped campgrounds. Camp activities may also include transportation, sometimes at night, to and from Camp Summit. The participant may spend several nights outdoors.

In addition to the hazards and risks described above, the hazards and risks of the camp activities may also include, but are not limited to, the following: acts of other participants (including from the failure of other participants to follow instructions or obey safety regulations), manufacturers defects or malfunctions in equipment, weather conditions (including unforeseen, inclement or intemperate weather), consumption of food and drink, fire, first aid, emergency treatment, or other services provided.

Camp Summit will not have medical personnel, other than Wilderness First Responder certified instructors, at the location of the camp activities or at Camp Summit.

I acknowledge that engaging in camp activities may require a degree of skill and knowledge different than other activities of Camp Summit and that my family has responsibilities as participants to act prudently and carefully.

I certify that my family members are fully capable of participating in the camp activities. My family is in good health and physically fit and has not been advised by a physician not to participate in arduous physical activities. I know of no reason, health-related or otherwise, why the members in my family are not capable of participating in the camp activities.

I acknowledge that I have read and completed fully the Medical Form provided by Camp Summit and accept full responsibility for omissions, errors or out-of-date information on that form.

I fully understand and appreciate the risk of injury, illness, property loss or theft, and even death inherent in the camp activities. I further understand that unforeseen circumstances may arise that have not been identified. I acknowledge that I have read the clothing and equipment list provided by Camp Summit, and accept full responsibility for inadequate clothing or equipment and for clothing and equipment which I fail to provide to my family.

I acknowledge that the staff of Camp Summit has been available to more fully explain to me the nature and physical demands of these camp activities and the inherent risks, hazards and dangers associated with them. Therefore, in consideration of being permitted to participate in this activity, I assume all risks and accept full responsibility surrounding my family's participation in the camp activities, the transportation related to them and any activities undertaken as an adjunct thereto, which risks include illness, injury and death.

I have read and agree to the Participant Acknowledgement of Risk 2016.

Signature of Parents or Guardians: _____ **Date:** _____

2017 Registration Information & Policies

Reservations / Deposit

A minimum deposit of \$150 must accompany your family registration within 2 weeks of registration in order to reserve your spot. Only a full payment will secure your spot and finalize your registration for Family Camp.

Final Payment

Final Payment of camp fees must be received by our office by **August 15th, 2017** to secure and finalize your spot. Family reservations that have not been paid in full by this date will no longer be held in our system and will be released to waitlisted families if applicable.

Registering After August 15th, 2017

Full payment of Camp Fees will be required upon submission of your registration if you are applying after August 15th, 2017 - Deposits will not be accepted by our office for registrations received after this deadline.

Cancellation & Refund Policy

- **Up to August 15th, 2017** : Full refund of all camp fees including deposit, less a \$50 administration fee.
- **August 15th - September 5th, 2017** : Deposit is non-refundable. All other fees paid, fully refundable less a \$50 administration fee.
- **After September 5th, 2017** : All fees are non-refundable.

There will be no refund made for any families leaving camp due to homesickness, nor for arriving late or leaving early. No refund will be available for campers dismissed from camp for breaching camp rules.

Camper Code of Conduct

Camp Summit is a fun place – independence and freedom are important at camp! In the spirit of community living, campers are expected to be respectful and mindful of others around them. Therefore, some of the basic rules and expectations (*from home and school*) are still valid and important at camp. All rules are designed around safety and respect. Campers are expected to take responsibility in caring for themselves and others. Campers are asked to respect the environment and the camp setting.

The following behaviours or actions are NOT tolerated at Camp Summit: bullying and/or harassment, sexual misconduct, alcohol and/or drug consumption, smoking, use of profanity (swearing), theft, vandalism, and aggressive defiant/disorderly conduct.

The Camp Director reserves the right to withdraw any camper without warning who, in their opinion, compromises the physical or emotional safety of any person at camp, or who is an immediate hazard to the safety of themselves or others. Camp Summit will also remove a camper who is negatively affecting the experience of another camper or group of campers.

No Lice/No Nits Policy

Camp Summit maintains a strict "No Lice/No Nits" policy. Because head lice are prevalent in our communities, parents are asked to check their child's hair for evidence of lice and/or nits one week before camp begins to allow adequate time for treatment if necessary. Please confirm the absence of lice/nits the day your group comes to camp. Any camper or participant with evidence of lice will be excused from camp.

Conditions of Enrollment

Camp Summit is a fun place I agree to follow the policies and procedures set out by the Camp Summit administration and enforced by the Camp Summit staff. I understand that these policies include, responsible drinking, and that I'm responsible for my actions if I consume any alcohol on site. I also undertake to conduct my activities in a safe and careful manner. I undertake to indemnify Camp Summit and the Camp Summit Outdoor Education Centre from and against any and all loss, cost, damages, expense and liability in connection with injury or death which may arise out of my improper use of Camp Summit property.

I have read the registration notes, refund policy and conditions of enrollment and accept the terms described for the Family Camp Weekend at Camp Summit.

Signature of Parents or Guardians: _____ Date: _____



Family Medical Form 2017

	Dietary Restrictions (ex. Gluten Free, Vegetarian...)	Allergies (ex. Medications, Bee Stings...) *Please Indicate if individuals carry an epi-pen with them*	Other Notes Please Indicate any additional information about the participant that would be helpful to know!
Family Member 1:	Date of Birth: Care Card #		
Family Member 2:	Date of Birth: Care Card #		
Family Member 3:	Date of Birth: Care Card #		
Family Member 4:	Date of Birth: Care Card #		
Family Member 5:	Date of Birth: Care Card #		
Family Member 6:	Date of Birth: Care Card #		

Medical Permission Statement: To the best of my knowledge, the individuals herein described are good health, free of communicable disease, and physically able to participate in all camp activities, except as noted above. In case of medical and/or surgical emergency, and I am not immediately available for consultation, I hereby give permission to the physician, staff & or nurse selected by the camp director, to secure proper treatment (i.e. hospitalization, injections, transfusions, anaesthesia, or surgery as appropriately required) for the individuals named above.

I certify that the above information is accurate, and that I concur with the statements as described

Signature: _____ Date: _____

Additional Family Information

Has your Family Attended Camp Summit Before? YES NO If Yes, which year is this for you at Camp? _____

If yes, which cabin have your stayed in before? _____

What activities is your Family excited for during their time at Camp Summit?

<input type="checkbox"/> Archery	<input type="checkbox"/> Climbing	<input type="checkbox"/> Orienteering	<input type="checkbox"/> Biking	<input type="checkbox"/> Hiking Camping Trip	<input type="checkbox"/> Low Ropes
<input type="checkbox"/> Arts & Crafts	<input type="checkbox"/> Field Games	<input type="checkbox"/> High Ropes	<input type="checkbox"/> Initiative Games	<input type="checkbox"/> Canoeing	<input type="checkbox"/> Cabin Choice
<input type="checkbox"/> All Camp Games	<input type="checkbox"/> Day Hiking	<input type="checkbox"/> Swimming	<input type="checkbox"/> Campfire Time	<input type="checkbox"/> Bouldering	<input type="checkbox"/> Early Morning Risers

What do you look for in a REALLY GOOD Camp experience?

What are your family goals during your time at Camp? What would you like to accomplish together?

Is there any additional information that we should know about your family that would be beneficial in creating a positive and successful experience at Camp Summit?

Will any one from your Family be celebrating their birthday during their session at Camp? YES NO

The Team at Camp Summit are happy to help make their Birthday a special time while at Camp! If you have a special dessert, present or card you would like us to give to your camper on their special day, we can arrange it for you! Please contact the Camp Summit office in advance to make arrangements.

There are lots of fantastic pictures taken at Camp each summer, some of which are used on promotional material and posted on our website. Do you give permission to Camp Summit to use a picture of your son/daughter?

YES NO Printed Name of Parent/Guardian: _____

Signature of Guardian : _____ Date: _____