



# WOMEN'S WEEKEND

September 29th - October 1st, 2017  
Registration Package

**CAMP SUMMIT**  
PO BOX 48 - Squamish, BC - V8B 0A1  
Phone: (604) 898 3700  
Fax: (604) 898 3708  
info@campsummit.ca

## PARTICIPANT INFORMATION (Must Be 19 years or older)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone Number : \_\_\_\_\_

Have you attended a Women's Weekend at Camp Summit before?  YES  NO

## DIETARY INFORMATION

Do you have any Dietary Restrictions? Please Indicate Below...

- |   |                                      |
|---|--------------------------------------|
| <input type="checkbox"/> None               | <input type="checkbox"/> Vegan       |
| <input type="checkbox"/> Vegetarian         | <input type="checkbox"/> No Pork     |
| <input type="checkbox"/> Lactose Intolerant | <input type="checkbox"/> Gluten Free |
| <input type="checkbox"/> No Red Meat        | <input type="checkbox"/> _____       |

## MEDICAL INFORMATION

Medical Insurance Number (Care Card Number)

\_\_\_\_\_

Do you have any Allergies? Indicate severity & triggers (airborne, contact or Ingestion) – in the case of a SEVERE allergy, please provide a personal emergency management plan & history of previous reactions.

- |                                      |                                      |
|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> None        | <input type="checkbox"/> Bee Stings  |
| <input type="checkbox"/> Foods _____ | <input type="checkbox"/> Medications |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Nuts        |

**\*Epi-pen required for allergies?:**  Yes  No

Are there any health concerns that would limit your full participation during the program? Please describe below...

## ACCOMODATION PREFERENCES

<p><b>Early to Bed</b> <small>(In bed by 10:30pm)</small></p>	<p><b>Night Hawk</b> <small>(In bed after 11:30pm)</small></p>
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Please List any Cabin Mate Requests Below:

# Women's Weekend-Registration Notes

## REGISTRATION CONFIRMATION

Once your registration has been processed and payment has been received by our office, a registration confirmation including your updated invoice will be emailed out to you.

## RETREAT INFORMATION PACKAGE

In the months leading up to our Women's Weekend, our office will be sending out detailed information to you (via email) including a program schedule, list of speciality workshops available, packing list and driving directions to Camp Summit.

## ALCOHOLIC BEVERAGES

Alcohol beverages will be allowed on the Camp Summit property, however we ask that when drinking any glassed beverage on site that you carry it in a plastic cup or travel mug. This way we ensure that no broken glass or bottles will be left around Camp Summit. We do ask that participants do remember that we are foremost a Children's Summer Camp and Outdoor Education Centre, so please drink responsibly.

## NUT SAFE POLICY

We ask that you DO NOT bring anything with NUTS as an ingredient onsite. We are a nut safe camp and must ensure the safety of all children and staff who have a nut allergy. If you do bring snacks that you'd like to keep in your cabin, please bring them in a tightly sealed Tupperware / Cooler. If these snacks are left out in the open you WILL have small animal visitors.

## DEPARTURE CHECK OUT

Prior to your departure, all sleeping quarters must be swept and all garbage must be removed from them. Please leave cabins as you found them. Please make sure that all litter is deposited in the garbage cans found around the site. Please dispose of all food litter in the bear proof receptacles provided on the site, and recyclables in the recycling bins provided. Check to make sure that no personal belongings have been left behind. Double check all dresser shelves and sleeping quarters to make sure that everybody has everything. Summit does maintain a lost and found, however, after a few weeks all items left behind are donated to a local charity.

## OTHER NOTES:

- Participants are responsible for providing their own bedding for the Women's Weekend program.
- Each cabin is equipped with an electrical outlet, located near the back of your cabin.
- Camp Summit has no cellphone reception - We are happy to provide internet access in the lodge and office for your convenience. Telephone access is also available in the event of a personal emergency in our Office.
- You are welcome to bring coolers with you on the weekend for your convenience. Ice is provided in our Dining Hall facility.
- Sorry, pets are NOT permitted on the camp property.
- We invite you to '**choose your own pace**' this weekend! Participate in the activities YOU want to do! And feel free to take some time for yourself! Find a quiet moment or catch up with friends around the fire!

*I have read and agree to the Registration Notes for Women's Weekend .*

Signature of Participant: \_\_\_\_\_

Date: \_\_\_\_\_

# Participant Acknowledgement of Risk

**Participant Name:** \_\_\_\_\_

I have read a description of the camp activities that I'm 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 I am responsible as a participant to act prudently and carefully.

I am fully capable of participating in the camp activities. I am in good health and physically fit and have not been advised by a physician not to participate in arduous physical activities. I know of no reason, health-related or otherwise, why I am 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 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 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 .*

**Signature of Participant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

