

Camp Woodboia, Inc
The United Church of Canada

Camper Registration Form 2024

Name: _____ Date of Birth: _____ Age: _____
Gender: _____ Home Church (if applicable): _____
Address: _____ Email: _____
Home Phone #: _____ Cell #: _____

Camper Information:

1. Are you a first-time camper? ___ Yes ___ No
2. What are some of your interests? _____
3. Does your family have a Wood Mountain Regional Park Pool Pass for 2024? ___ Yes ___ No

2024 Camp Dates:

Please place a check mark beside the weeks that you are available to work.

_____ Explorer Camp: August 6 th – 8 th (Ages 6-8)	\$180
_____ Discovery Camp 1: July 22 nd – 26 th (Ages 7-10)	\$250
_____ Discovery Camp 2: July 29 th – August 2 nd (Ages 11-13)	\$250

***Please Note: All registrations must be received by the deadline of July 1st, 2024.
Registrations received after this date may be accepted at the discretion of the Registrar
and subject to availability, but will incur an additional
Late Registration Fee of \$50 per camper.***

For Custodial Parent(s)/Legal Guardian(s):

1. I recognize the right of the Camp Director to send my child home if necessary and that I will be contacted to pick up my child in this event. ___ Yes ___ No
2. During the camp pictures may be taken. Are you willing to have your child's photograph or video recording used in camping stories for newspapers of United Church publications? ___ Yes ___ No
3. Camp Woodboia uses the facilities of Wood Mountain Regional Park and the Wood Mountain Post Provincial Historic Park (for hiking, swimming, and other activities. Are you willing to allow your child to leave the campsite for these activities? ___ Yes ___ No
4. By completing this form electronically, I recognize that printing my name below is the equivalent of my signature. ___ Yes ___ No

Custodial Parent(s)/Legal Guardian(s) Names: _____ Date: _____

Home Phone #: _____ Cell #(s): _____, _____, _____

For Campers:

1. By signing this form, you promise to do your very best to have fun, listen to your leaders, and make camp a good place for everyone.

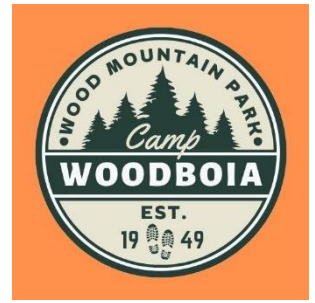
Camper Name: _____ Date: _____

Next Steps:

Complete the following health and payment forms, and return them to the Registrar. When your application is accepted you will receive information about arrival and departure times and other applicable information, such as what to bring and not bring to camp. ***Please do not come to camp until you have received confirmation of your registration.*** If a camp is full and we cannot accommodate your child, a full refund will be sent.

Camp Apparel:

We are happy to offer our camping family new apparel this year, featuring our new logo created by Payton Todd, a long time Camper, Leader, and now Director. We will be selling bunnyhugs, t-shirts, water bottles, ball caps, and bucket hats. Please peruse the colours and sizes in the next couple of pages and complete the attached order form with all applicable information. Deadline to order is July 1st (firm). We can't wait to see you sporting your new Camp Woodboia Apparel!



BUNNYHUGS - \$55

Sizes:

Adult – XS – 4XL

Youth – XS – XL

Colours:

 Black / Noir PMS Black 6C	 Charcoal Heather / Charbon Chiné PMS Black 7C	 Athletic Grey Heather / Gris Chiné Sportif PMS 422C	 Navy / Marine PMS 533C	 Royal / Bleu Royal PMS 7686C	 Forest Green/ Vert Forêt PMS 4203C
 Purple / Violet PMS 3566C	 Maroon / Marron PMS 7643C	 Red / Rouge PMS 200C	 Pink / Rose PMS 496C	 Gold / Or PMS 130C	 Orange / Orange PMS 4010C
 White / Blanc PMS White	 * Ivory / Ivoire PMS Warm Grey 1C	 * Sand / Sable PMS 4247C	 * Ash Grey Heather / Gris Cendre Chiné PMS 420C	<p>* New colour for 2024</p> <p>-----</p> <p>Nouveau couleur pour 2024</p>	

T-SHIRTS - \$35

Sizes:

Adult – XS – 4XL

Women – XS – 2XL

Youth – XS – XL

Colours

 Black / Noir PMS Black 6C	 Charcoal Heather / Charbon Chiné PMS Black 7C	 Athletic Grey Heather / Gris Chiné Sportif PMS 422C	 Forest Green / Vert Forêt PMS 4203C	 Kelly Green / Vert Kelly PMS 3288C	 Fatigue Green / Vert Militaire PMS 5545C	 * Ivory / Ivoire PMS Warm Grey 1C
 Navy / Marine PMS 533C	 Royal / Bleu Royal PMS 7686C	 Sapphire / Saphir PMS 4151C	 Light Blue / Bleu Pâle PMS 291C	 Gold / Or PMS 130C	 Yellow / Jaune PMS 113C	 * Sand / Sable PMS 4247C
 Purple / Violet PMS 3566C	 Maroon / Marron PMS 7643C	 Red / Rouge PMS 200C	 Orange / Orange PMS 4010C	 Pink / Rose PMS 496C	 White / Blanc PMS White	<p>* New colour for 2024</p> <p>-----</p> <p>Nouveau couleur pour 2024</p>

WATER BOTTLES (28oz): - \$30



Colours
Black
Grey
White
Blue

BUCKET HATS: - \$30



BL



FG



NA



NV

BALL CAPS: - \$35



Heather Grey/White



Black/White



Green Glow/Beige

Order Form:

Item	Quantity	Size (Youth or Adult & Size for bunnyhugs or t-shirts)	Colour (Full Colour Name as printed above)	Cost (Price x Quantity)

Total Cost = _____

Payment Details:

Full Camp Fees (includes daily tuck money) _____

Less Family Discount - _____
(10% if sending 3 or more children from the same household)

Plus Apparel + _____

Plus Late Registration Fee (\$50 if submitting after July 1st) + _____

Total Enclosed = _____

*Please make cheques payable to Camp Woodboia
and indicate the camper or family name in the memo line.*

*E-transfers are also accepted for registration fees.
Please send e-transfers to campwoodboia@gmail.com.*

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2024 Personal Health Form

(For Camp Director and Medical Personnel in case of emergency)

This entire two-page form must be completed by ALL campers and leaders.

Camper/Leader Information:

Name: _____ Health Card #: _____
Other Insurance: _____ Policy #: _____
Family Doctor: _____ Phone #: _____
Date of Birth: _____ Age (at time of camp): ____
Gender: _____ Height: _____ Weight: _____

Custodial Parent/Legal Guardian Information:

Name(s): _____
Full Address: _____
Home Phone #: _____ Work #: _____
Cell #s: _____, _____, _____

Official Alternative Contact Information:

Name: _____
Full Address: _____
Home Phone #: _____ Cell #: _____ Work #: _____

1. What medical conditions or allergies does your child have? Please indicate the particular medical conditions (physical, mental, or emotional) that could impact your child's stay at camp.

2. Are your child's immunizations up to date? ___ Yes ___ No
3. Is your child currently taking medication that will need to be taken at camp? ___ Yes ___ No
- a. If so, please indicate what medication it is and when/how it will need to be given. Remember that all medications are to be handed to the medical personnel at check-in and must be accurately labelled with clear instructions.

4. Are there any physical, emotional, or behavioural conditions that camp staff might need to be aware of in order to give your child the best experience at camp?

5. Custodial parent(s) or legal guardian(s) assume full responsibility for the camp applicant's health and well being, such that camp activities which include hiking, swimming, running, etc. will in no way aggravate any medical condition. Please speak to your family doctor if you have specific questions or concerns before completing this form.

Please make absolutely certain that someone is available for camp staff to contact at any time (day or night) while your child is in our care.

As the person responsible for _____ (Camper or Leader Name), I authorize the Camp Director, Medical Personnel, or their designate to:

1. Administer anti-inflammatories and/or antihistamines (non-prescription, over-the-counter drugs) if deemed necessary for the relief of fever, pain, and/or allergy symptoms when other methods have been unsuccessful.
2. Secure medical advice and care should the need arise.

I waive all claims against Camp Woodboia and its employees and representatives for any accident or injury to the applicant or his/her/their property in conjunction with this camp. I also agree to accept financial responsibility in excess of benefits allowed by provincial or other insurance plans.

It shall be at the discretion of the Camp Director as to what medical steps be taken with regard to the health, welfare, and safety of your child.

I agree to the above statements, and that the information on this form is accurate at the time of registration. I further agree that I will notify the Medical Personnel of any changes to this form upon arrival at Camp. By completing this form electronically, I recognize that printing my name below is the equivalent of my signature.

Signature: _____ Date: _____

Next Steps:

Please save this completed form ***with your child's name in the file name*** and then email or mail your Registration Form and Personal Health Form to:

Marla Gavelin
Box 27
Glentworth, SK
S0H 1V0

Email: campwoodboia@gmail.com

Phone: 306-478-7747