

Camp Woodboia, Inc
The United Church of Canada
Camper Registration Form 2026

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 2025? ___ Yes ___ No

2025 Camp Dates:

Please place a check mark beside the weeks that you are registering for.

Please Note: We do not want cost to be a barrier to your child(ren) attending Camp Woodboia.

If the registration fees present a challenge for your family, please contact our Registrar.

A limited number of bursaries are available to help with the cost.

____ Explorer Camp: August 5th – 7th (Ages 6-8) \$200

A three-day camp experience for our youngest campers. This allows them to try out the idea of camp without the commitment of the five-day week. Campers will have fun with games, crafts, swimming in the afternoons, campfire, and various other activities.

____ Discovery Camp 1/Swim Camp 1: July 20th – 24th (Ages 7-10) \$275

____ Discovery Camp 2/Swim Camp 2: July 27th – 31st (Ages 11-13) \$275

These two Discovery Camps are a five-day week for two different age groups. Campers will have fun with games, crafts, swimming in the afternoons, campfire, and various other activities. During these camps, parents who wish to enroll their child(ren) in swimming lessons at the Wood Mountain Regional Park may do so and the campers will be taken to the pool for their swimming lessons at the appropriate time. This is NOT required, but is simply an option for parents who wish to register their child(ren) in both activities.

Please Note: All registrations must be received by the deadline of June 15th, 2026.

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.

Swim Camps:

Swim Camps are only available for the week-long Discovery Camps (ages 7-10 and 11-13), NOT the Explorer Camp (ages 6-8). Lessons must be booked and registered through the Wood Mountain Regional Park Pool directly (<https://woodmountainpark.ca/swimming-lessons/>).

1. Have you registered your child for Swimming Lessons through the Wood Mountain Regional Park Pool for the week that you wish them to be at Camp Woodboia? ___ Yes ___ No
 2. If yes, what level course and time will they be taking during their week at Camp Woodboia?
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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 or 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.

Payment Details:

Full Camp Fees (includes daily tuck money) _____

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

Plus Late Registration Fee (\$50 if submitting after June 15th) + _____

Total Enclosed = _____

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

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

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The United Church of Canada

2026 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. Are there any dietary restrictions (vegetarian, celiac, lactose intolerance, etc) that the camp staff should be aware of for your child?

6. Does your child have trouble eating certain foods, or are they very limited in what they like to eat? If so, what are some comfort foods for them? We cannot guarantee certain foods, but we will do our best to accommodate them.

7. 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.

If you need to contact the Camp during the week, you can reach us at 306-266-2144.

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:

Dale Groves, Registrar
Email: campwoodboia@gmail.com

Mail:
Box 523,
Lafleche, SK S0H 2K0