

CAMPER REGISTRATION FORM 2010 One form per camper **AND** per session
AVOID DELAYS: CAREFULLY COMPLETE BOTH FRONT AND BACK

Camper's Name: Last: _____ First: _____

Male Female Birthdate: M ___ D ___ Y ___ As of June 30: Age _____

Grade completed as of June 30'10 _____

Have you attended Camps Assiniboia, Moose Lake or Koinonia's Summer Program before?

Yes No

COMPLETE Mailing Address

City _____ Postal Code _____

Email (optional, for camp updates) _____

Complete applicable lines

Father's/Mother's/Guardian names: _____ / _____

Phone: H _____ Work (Dad/Mom) _____ / _____

Cell (Dad/Mom) _____ / _____

Children's Agency contact person _____ Work #: _____

Church attended _____

Church Denomination _____

Cabinmate request (**I ONLY**). Campers must be in same grade or same age.

*We will attempt to meet this request; however there are circumstances (ie. "chain requests" which are an attempt to keep all friends together) where this is not always possible.

CAMP SESSION CHOICE (Circle Camp choice)

Choice #1: Title _____ Camp: A K ML Dates _____

Choice #2: Title _____ Camp: A K ML Dates _____

If applying for Advanced horsemanship, please indicate level: I ___ II ___

FEES: Payment must accompany application payable to

MENNONITE CHURCH MANITOBA

(cheques may be postdated no later than April 9 *\$20 charge on NSF cheques

Full Fee _____

Less family discount _____

Less early bird registration _____

(If postmarked before April 9*) _____

plus bus fare (see below) _____

TOTAL ENCLOSED _____

(GST #R106967094)

(Have you included all applicable discounts?)

Partnership donations included (**separate cheque please**) _____

Mail to: **Camps with Meaning**
200-600 Shaftesbury Blvd
Winnipeg MB R3P 2J1

CAMPER INFORMATION

Please check any of the following which apply. (Attach note, if necessary). My camper:

Has allergies. Please list: _____

Has dietary concerns: Please list: _____

Has bed wetting problems

Has ADD Has ADHD

Takes Ritalin or other behavioural medication: _____

Has special physical, emotional, behavioural needs: _____

Has had contact with a social agency in the past 12 months _____

Is not a Canadian citizen

There are custody issues camp should be aware of (Please attach note.) yes or no

WAIVERS AND CONDITIONS OF ENROLMENT

1. The Camp Director reserves the right to dismiss a camper who in his/her opinion is a hazard to the safety and rights of self and others, or who appears to have rejected the reasonable controls of camp. *A parent or designate adult must be available during the week to pickup a dismissed child.*

2. The parents/guardians submitting this application are those having legal custody over the child. Conditions of custody, if applicable, will be fully communicated in writing to the camp.

3. While all reasonable precautions are taken for the safety and good health of our campers, *Mennonite Church Manitoba*, its directors and staff members are hereby released from any and all liability in the event of any illness, accident or misfortune that may occur to the applicant camper or his/her property. Each camper must be covered by Provincial health or equivalent medical insurance.

4. The signature of the parent/guardian on this application gives the Camp Director the right to arrange for any special services or other requirements necessary for the best interest of the camper and gives the Camp Director the right to approve and obtain medical attention necessary for the camper's welfare and good health including injection, anesthesia or surgery. **(For Camp Moose Lake campers, this includes crossing the border with the child in order to seek medical attention.)** In such situations, the camp will attempt to notify the parents as soon as possible. The parents/guardian are responsible for any additional expense that may result from such services.

5. The parents/guardians submitting this application give their permission for any photography, videos or other pictures of the applicant camper to be used in camp promotional material and brochures without any financial compensation or additional consent, unless they have checked the following box: (To help us ensure we don't inadvertently use the child's image, please attach a recent photo.)

 _____ Permission denied

I have read, understood and hereby agree with the waivers and conditions. Before you sign, to avoid delay, please "double check" that entire registration is complete. This will save needless delay and ensure your camper's choice to get the dates requested. Thank you.

Signature of Parent/Guardian _____

Date _____

Circle Bus Choice			
	Wpg return	To camp	From camp
CK	\$60	\$30	\$30
CML	\$50	\$25	\$25
	Steinbach return	To camp	From camp
CML	\$40	\$20	\$20
Inquire for rates for other points, e.g., Mather, Crystal City, Morden			