

2018 WHISPERING PINES SUMMER CAMP REGISTRATION FORM

To register your child or teen for one of our Summer Camps, please complete the form fields below. Please note that completion of this form does not guarantee your child's or teen's registration. Once the form has been received, our Camp Director will contact you and send you a formal confirmation.

SUMMER CAMP OPTIONS

Our summer camps have been designed around age-ranges for reasons including, but not limited to physical maturity, social structure, program design, teaching relevance, etc. Exceptions to this structure will be made on a case-by-case basis, at the discretion of the Camp Director. If you believe your child or teen should be placed in a Summer Camp outside their given age-range, please contact the Camp Director prior to continuing with this registration form.

Please note that there is a mandatory Health and Safety requirement that NO pets are to be brought to Whispering Pines Bible Camp site.

Please choose the appropriate Summer Camp for your child or teen:

- | | | |
|---|-------------------------|--------------|
| <input type="checkbox"/> Teen Camp (Ages 14 -17) | July 8-13 (5 nights) | \$300/Camper |
| <input type="checkbox"/> Jr Teen Camp (Ages 12-14) | July 15-20 (5 nights) | \$300/Camper |
| <input type="checkbox"/> Intermediate Camp (Ages 10-12) | July 22-27 (5 nights) | \$300/Camper |
| <input type="checkbox"/> Junior Camp (Ages 8-10) | Jul 29-Aug 3 (5 nights) | \$300/Camper |
| <input type="checkbox"/> Squirt Camp (Ages 6-8) | Aug 5-8 (3 nights) | \$180/Camper |

IMPORTANT: WHEN MAKING PAYPAL PAYMENT, Please follow the PayPal link and enter in payment without GST (\$285.72 per camper and \$171.43 per "Squirt" camper). PayPal automatically adds GST to final total.

PERSONAL INFORMATION POLICY

The Personal Information Policy of Whispering Pines Bible Camp Association conforms to current legislation by both the Alberta Government (PIPA) and Federal Government (PIPEDA). Our policy is as follows: Any personal information collected by Whispering Pines Bible Camp Association *may* be stored for up to one year or more, but used only for the purpose of the selection of a proper group level, for promoting next year's camp and for the purpose of making contact with a parent or guardian should the need arise. This information will not be shared with any other group or used for any other purpose.

CAMPER INFORMATION

Camper Name _____

Last Name, First Name

Camper Birth Gender Male Female

Camper Date of Birth _____
DD/MM/YYYY

PARENT / GUARDIAN CONTACT INFORMATION

Parent / Guardian Name(s) _____
Last Name, First Name

Home Phone _____ - _____ - _____

Cell Phone _____ - _____ - _____

Work Phone _____ - _____ - _____

E-mail address _____

Mailing Address _____

Street Address, City, Province/State, Country (if different than Canada), Postal/Zip _____

CONSENT TO PARTICPATE

By typing my name and date of registration below, I hereby give my consent for the above named camper to participate in skills and activities organized and facilitated by Whispering Pines Bible Camp Association, understanding the inherent risks involved with many of these camp skills and activities.

Activities that may be offered include but are not restricted to, Archery, Air Riflery, Canoeing, Kayaking, Hiking, Photography, Outdoor Survival, Drama, Music. Mountain Biking if there is enough interest (during Teen, Pre-Teen and Intermediate camps only) (see note*).

* If your child is interested in Mountain Biking, they must bring their own bike (in good mechanical condition) and an approved helmet and a spare tube. Optional, but highly recommended are Knee pads, gloves & goggles. WPBCA assumes no responsibility for loss or damage to bikes and accessories and all items should have proper identification. Please indicate if they are planning to mountain bike (below)

Please indicate if your child is planning to Mtn Bike. YES NO

Signature _____

Date of Registration _____

MEDICAL INFORMATION

Health Care Plan & Card Number

Family Doctor Name & Phone Number

Medications & Dosage Requirements (Enter 'none' if not applicable)

Allergies & Treatments (Enter 'none' if not applicable)

Emergency Contact Name & Phone

Other Pertinent Medical Information

CONSENT FOR EMERGENCY MEDICAL TREATMENT, FIRST-AID & MEDICATIONS

In consideration of the above named camper's opportunity to participate in camp activities; by signing my name and date of registration below, I hereby give my consent to emergency medical treatment, hospitalization and/or other medical treatment as deemed necessary for the welfare of the above named camper, by a physician, qualified nurse, and/or hospital in the event of illness or injury during all periods of time in which the camper is under the care of Whispering Pines Bible Camp Association. I further hereby waive on behalf of myself and the above named camper, any liability of Whispering Pines Bible Camp Association, its board members, officers, directors, employees, affiliates, volunteers or representatives arising out of such medical treatment.

In the event that the above named camper encounters an injury or illness; by signing my name and date of registration below, I hereby give my consent to Whispering Pines Bible Camp Association, its board members, officers, directors, employees, affiliates, volunteers or representatives possessing first-aid training, to administer first-aid treatment, including non-prescription medications for pain and/or symptom relief.

For prescription medications; by signing my name and date of registration below, I hereby give my consent to Whispering Pines Bible Camp Association Staff that are First Aid Trained or higher, to administer the medications to the above listed camper as instructed. (Please send medications in the original bottle or packaging, listing detailed instructions on dosage amounts and times to administer.)

Signature

Date of Registration

PHOTO / VIDEO RELEASE

I give permission for Whispering Pines Bible Camp Association to use photographs and/or videos containing the above listed camper’s image for promotional purposes.

- Yes, I agree to allow photos and/or videos of my child or teen to appear in promotional material.
- No, my child’s or teen’s image may not be used for promotional purposes and I will email a current photo to whisperingpinesbiblecamp@gmail.com to ensure their image will be avoided.

CAMPER SIGN OUT & PICK UP

Other than myself the following people may sign out and pick up my child or teen from camp

Signature

Date of Registration

CAMP T-SHIRTS

Camper T-shirt Size

- | | | | |
|--|--|--|------------------------------------|
| <input type="checkbox"/> Youth X-Small | <input type="checkbox"/> Youth Large | <input type="checkbox"/> Adult Medium | <input type="checkbox"/> Adult 2XL |
| <input type="checkbox"/> Youth Small | <input type="checkbox"/> Youth X-Large | <input type="checkbox"/> Adult Large | |
| <input type="checkbox"/> Youth Medium | <input type="checkbox"/> Adult Small | <input type="checkbox"/> Adult X-Large | |

ADDITIONAL INFORMATION

How did you hear about Whispering Pines Bible Camp?

- Local Church Church Name: _____
- Friend or Family Member
- Internet: Website / Search (Ex. Google)
- Internet: Social Media (Ex. Facebook)
- Advertisement or Printed Publication
- Other _____

Throughout the year our family

- regularly attends a local church
- occasionally attends a local church
- does not attend church

Local Church name (if applicable)

Please use this field for any other notes that may be useful in the registration process

All camps start at 6 PM on Sunday and end at 6 PM on the last day of camp. Sign-in will start at 4 PM. Cabins and Activities will be assigned **after 4pm** on a first-come first-served basis. Parents/Guardians picking up their children are invited to join us for supper at 5 PM on the last day of camp.

SUMMER CAMP REGISTRATION DEPOSIT & FINAL PAYMENT

As part of the Summer Camp registration process, a \$50 (per child) non-refundable deposit should be submitted at the time of registration. Final Payment (remaining funds) should be submitted 30 days prior to the Camp Arrival Date.

By signing my name and date of registration below, I hereby acknowledge that I will provide a \$50 (per child) non-refundable deposit at the time of registration and submit final payment (remaining funds) 30 days prior to the camp arrival date. Furthermore, I hereby acknowledge that neglecting to provide this deposit or submit full payment by required date may result in the cancellation of my child and/or teen's registration at which time a child and/or teen on a waiting list will be selected to fill the vacancy. Due to the shortened camping season, once the camps are full we will not be accepting any further applications. Please do not bring your child to camp to register at the time of your camp unless you have a spot or have contacted the director.

Signature

Date of Registration

IMPORTANT NOTE: Secure online payment through our website is the preferred method of payment. Alternately, cheques may be made payable to Whispering Pines Bible Camp Association. Please remember to write the name(s) of your child or teen in the notes field of your payment(s). We encourage you to get your registrations in as early as possible. For registrations after July 1, 2018, please contact us to confirm availability and ensure a spot is reserved for your child.

Start date for registration is February 1, 2018 and the last day to register is EACH CAMP-START DATE

Paper registrations and cheques can be mailed to:

Whispering Pines Bible Camp Association
1009 East Lake Blvd, NE
Airdrie, AB
T4A 1R3
Canada