

Camp NeeKauNis
40 NeeKauNis Road
Waubauskene, Ontario, Canada
L0K 2C0
705.538.2357

...find yourself at



**CHILDREN'S and YOUTH
CAMPS and Events
REGISTRATION FORM
www.neekaunis.org**

Parents and guardians please complete and sign a separate form for each camper.

Camper Information

Full Name _____

Date of birth: (dd/mm/yr) _____ Gender _____

Full Mailing Address _____

Name of Parent or Guardian (P/G) _____

Relationship to Camper _____

Address (if different from camper's address) _____

P/G Home phone _____ P/G Cell phone _____

P/G Work phone _____ P/G Email _____

If you are under 18 and over 16 and coming to Camp alone, you must have a parent or guardian designate an On-site Adult Sponsor. We have appended a suitable form. Please pre-arrange if choosing a staff person

Emergency contact information

Best number to contact the parent/guardian *in an emergency*: Home Cell Work

Name of alternate contact _____ Relationship to camper _____

Alternate Home phone _____ Alternate Cell phone _____

Alternate Work phone _____ Best number: Home Cell Work

Camper Medical Information

When completed, this form will be kept confidential. It will be used by the camp director, emergency responders, healthcare providers, and camp staff, solely on a “need-to-know” basis.

Camper’s Name _____

Does the camper have any existing **medical conditions** that you would like to share with us (e.g. diabetes, asthma, hearing or sight impairment)? Yes No

If yes, please describe: _____

Is the camper taking any **medications that s/he will bring to camp**? Yes No

If yes, please bring a list and give to director upon arrival.

Does the camper have any significant **allergies** (e.g. medications, latex, or food)? Yes No

If yes, please describe: _____

Is there any other medical information we should have about your camper that will help us to ensure her/his safety and wellbeing while at Camp or in the case of emergency? Yes No

If yes, please explain: _____

Does the camper have trouble with bed wetting? Yes No

Family physician name and phone number (optional) _____

Health Card number or other health insurance information (optional) _____

NOTE: We do not provide professional counseling, addiction or psychiatric care.

Arrival and Departure from Camp

Will you be transporting your camper to and from camp?

Yes No

If you answered No, who will be transporting your camper to and from camp?

Please advise your director if there are any persons who are legally restricted (e.g. custody orders, etc.) from picking up your camper or having contact of any nature with your camper during camp.

Food and Accommodation

Does your camper have food allergies or sensitivities?

Yes No

If yes, please provide details. Be sure to note the *severity* of the allergies

Food Allergies _____

Food Sensitivities _____

Please list additional dietary needs of your camper (e.g. vegetarian, vegan, etc)

Does your camper have requests regarding cabin mates? (We will do our best to accommodate.)

Is there anything else you would like us to know about your camper's cabin assignment?

General Camper information

Is this the camper's first time attending Camp NeeKauNis?

Yes No

If yes, how did the camper hear about camp? _____

If no, when did your camper last attend camp? _____

Please describe any special interests, talents or abilities that your camper might like to offer or share during their time at Camp. _____

Please tell us about special wishes for activities or programs that your camper is looking forward to, or would enjoy during their time at Camp. _____

Signed Consent, Agreement, and Waivers

1. Consent to treatment

In case of medical emergencies, I hereby give permission to the physician selected by the camp director to provide appropriate medical treatment including hospitalization, medications, or surgery. I will assume responsibility for the fees associated with any medical treatment or prescribed medications.

Signature of Parent/Guardian _____ Date _____

2. Participation agreement

I agree to follow the policies of Camp NeeKauNis as outlined in the Camp registration materials and policies. I will not bring to Camp any weapon, any illegal drugs, alcohol, or any toy, clothing, or entertainment that promotes violence, prejudice or war. Also, personal electronic devices (cell phones, tablets, mp3 players, personal game consoles, computers, etc.) are not desired at Camp NeeKauNis. If these devices arrive at Camp, they will be collected, placed in a safe location, and returned to the camper or staff member upon their departure.

We have read and agree to the Participation Agreement

3. Field trip permission

I consent that my child attend Camp NeeKauNis and participate in all camp activities some of which may involve leaving Camp grounds for out-trips accompanied by Camp NeeKauNis staff.

My camper has permission to be transported in a private car driven by an adult camp staff member or volunteer. Yes No

Signature of Parent/Guardian _____ Date _____

4. Waiver: Hold Harmless Agreement

I _____ am the parent or guardian of _____ who is a camper at Camp NeeKauNis of Canadian Yearly Meeting of the Religious Society of Friends during the dates: _____. I agree to hold harmless Camp NeeKauNis, Canadian Yearly Meeting, its insurers, and its agents and volunteers in its camping programs, against any expense relating to a claim for injury or loss to my child or myself through any of them, unless caused by their intentional act. I make this agreement willingly on behalf of myself and my child or anyone who could claim damages on my child's behalf.

Signature of Parent/Guardian _____ Date _____

5. Keeping in touch

Camp NeeKauNis occasionally sends newsletters containing notices of upcoming camp sessions, events and other information. To do this we will retain your postal and e-mail addresses. This address information will never be conveyed to, or used by, any party other than Camp NeeKauNis. You may unsubscribe from our list at any time.

I would like to receive newsletters from Camp NeeKauNis Yes No

I would like my child to receive newsletters from Camp NeeKauNis Yes No

Camper's email address (optional) _____

6. Camp NeeKauNis photography and media release

Camp NeeKauNis will occasionally take photographs, videos, and audio recordings throughout the season for promotional purposes in print, on our website, or on our social media accounts. When you sign this registration you are confirming that you have the authority to agree to the publication of these materials on behalf of the camper you are registering. Your signature indicates that you release Camp NeeKauNis and its employees and representatives from any claims, demands, expenses, causes of action and for liability in any way related to the collection and use of testimonials and images. Please note that Camp NeeKauNis cannot control the use of media by other campers. This agreement is binding for all visits to Camp NeeKauNis. A signature from a parent or guardian is required for those under 18 years of age.

I have read and agree to the Photography and Media Release

7. Completion

I have read this registration form in its entirety and completed it with accurate information. I understand that in the event I have questions, I may contact the camp director directly, and can also access all Camp policies in full on the Camp NeeKauNis website.

Signature of Parent/Guardian _____ Date _____

I have read this registration form in its entirety.

Signature of Camper _____ Date _____

Fee Memo

A non-refundable payment of \$100 must accompany your completed registration form in order to hold a space for you or your Camper. This amount will be credited to your account when you pay the balance owing upon arrival at the beginning of your camp session. Your Director will confirm your total. Cheques are payable to Camp NeeKauNis and must be in Canadian funds.

Fees and Deposits can now be sent to neekaunis-treasurer@quaker.ca through your bank account. **Please put NeeKauNis Fees** in the message line of your email and in your message, your name, the name and year of the camp session, and the answer to your secret question. If you wish, you can mail your deposit cheque to Camp NeeKauNis c/o 91a Fourth Ave, Ottawa, ON K1S 2L1.

NeeKauNis Fee Memo (please bring this to Camp with you):

Name: _____

Camp Session: _____

Fees Subtotal: _____

Deposit: _____

Discounts:

Early Bird before 31 May: _____ (-10%)

Bring a new friend: _____ (-10%)

Donation *: _____

Fees Bursary Request **: _____

Total _____

DONATIONS:

Thank you for your donation to Camp NeeKauNis. Camp NeeKauNis is owned by Canadian Yearly Meeting of the Religious Society of Friends (Quakers), a registered charity. Your donations help us maintain our infrastructure and support our Bursary Program.

****FEES BURSARY REQUEST:**

We can offer fee support once per season per registration. Your Monthly Meeting may also be able to provide additional financial support. Your Director will advise you about the amount of your fees bursary. Please consider how much you will be saving in grocery cost or child care and use that to guide your request.

I acknowledge the receipt of a bursary amount of _____.

Signed: _____

Director: _____

Dated: _____

Designation of Sponsor For Youths 16 to under 18 attending alone.

To be completed by Parents or Guardians of Participants from 16 years old to under 18, attending alone.

Participant Name _____ Age _____

Parent/Guardian name _____ Phone _____

Sponsor name _____ Phone _____

To be signed by Parent/Guardian.

I _____, give permission for _____ to attend
(event name) _____ at Camp NeeKauNis, on dates _____ 20__.

If under any circumstances my child is hurt or ill, I authorize my child's sponsor and the camp directors to seek immediate medical attention for my child.

I have read and signed the registration form.

I have asked my child's sponsor to act on my behalf at this event, which may include being alone with my child. In the event of temporary absence from this event, the sponsor is authorized to designate a temporary sponsor.

Signed _____ Date _____

Parent or Guardian