



MANITOBA

PIONEER CAMP 2009 CAMPER APPLICATION

REGISTRATION IS ALSO AVAILABLE ONLINE AT www.manitobapioneercamp.ca

CAMPER NAME: (first) _____ (last) _____ Male Female

Birthdate: (mm/dd/yyyy) ____/____/____ Age at camp: _____ Grade in September 2009: _____

Address: _____ City: _____ Province: _____ Postal Code: _____

Camper Email (if separate from parent): _____ School: _____

Denomination/faith background: _____ Church (if attended): _____

How did you hear about us? _____ Attended Pioneer Camp Before?: Yes No

Swimming Level Completed: _____ (Please attach copy of swim certificate) First time away from home for a week or more? Yes No

Cabin Mate Preference (max. 2; must be same age): _____

RECRUITMENT:

I have recruited _____. Please apply \$40 non-refundable "Tuck Bucks" to my tuck account for each new camper I recruited this year. (Tuck Bucks will be applied after the recruited camper has registered.)

I am a new camper, and was recruited by: _____

PARENTS/GUARDIANS:

Custodial Parent 1: _____ Phone: (h) _____ (w) _____ (c) _____

Email: _____ Were you a participant in IVCF, ISCF, NCF, or Pioneer Camps? (please circle)

Custodial Parent 2: _____ Phone: (h) _____ (w) _____ (c) _____

Email: _____ Were you a participant in IVCF, ISCF, NCF, or Pioneer Camps? (please circle)

Camper lives with: Both parents Custodial parent 1 Custodial parent 2 Joint custody Other: _____

Alternate Contact (in case of emergency): _____ Phone: (h) _____ (w) _____ (c) _____

Email: _____ Relationship to camper: _____

Social Worker (CFS or CSS): _____ Phone: (w) _____ (cell) _____

Email: _____ Is camper currently in foster care? Yes No

What is your camper looking forward to most in his/her camping experience? _____

List your camper's fears or concerns, if any: _____

Please list additional comments or concerns: _____

Please check the desired camp(s) and calculate the fees.

Fees may be paid in full or a \$60 deposit sent now, with all balances payable June 1, 2009.

Applications submitted after June 1st must be accompanied by full camp fees.

Post-dated cheques are accepted with approval from the camp office.

GIRLS:

<input type="checkbox"/>	Classic Girls I	July 6 – 17	Ages 8 – 16	\$630	\$ _____
<input type="checkbox"/>	Classic Junior	July 6 – 11	Ages 7 – 10	\$315	\$ _____
<input type="checkbox"/>	Classic Girls II	July 20 – 31	Ages 8 – 16	\$630	\$ _____
<input type="checkbox"/>	Discovery Girls	August 3 – 8	Ages 8 – 11	\$345	\$ _____
<input type="checkbox"/>	Beyond: Canoe Trip	August 7 – 14	Ages 13 – 16	\$560	\$ _____
<input type="checkbox"/>	Quest Girls	August 9 – 14	Ages 11 – 13	\$345	\$ _____
<input type="checkbox"/>	LIT Girls	June 29 – July 31	Ages 16 – 17	\$1100	\$ _____

BOYS:

<input type="checkbox"/>	Discovery Boys	July 6 – 11	Ages 8 – 11	\$345	\$ _____
<input type="checkbox"/>	Voyageur Boys	July 16 – 25	Ages 14 – 16	\$730	\$ _____
<input type="checkbox"/>	Expedition Boys	July 18 – 25	Ages 13 – 15	\$560	\$ _____
<input type="checkbox"/>	Quest Boys	July 20 – 25	Ages 10 – 13	\$345	\$ _____
<input type="checkbox"/>	Fishing Camp	July 26 – 31	Ages 11 – 14	\$385	\$ _____
<input type="checkbox"/>	Classic Boys I	August 3 – 14	Ages 8 – 16	\$630	\$ _____
<input type="checkbox"/>	Classic Boys II	August 17 – 28	Ages 8 – 16	\$630	\$ _____
<input type="checkbox"/>	The Challenge	August 3 – 22	Ages 15 – 16	\$1050	\$ _____
<input type="checkbox"/>	LIT Boys	July 12 – August 14	Ages 16 – 17	\$1100	\$ _____

CO-ED:

<input type="checkbox"/>	Intro Sailing	August 17 – 22	Ages 13 – 16	\$375	\$ _____
<input type="checkbox"/>	Advanced Sailing	August 23 – 30	Ages 14 – 17	\$525	\$ _____

Family Discount: see last page for explanation (\$ _____)

Travel Expenses:

<input type="checkbox"/>	bus travel to and from Camp (round trip)	\$50	\$ _____
<input type="checkbox"/>	bus travel to Camp only (from Winnipeg)	\$30	\$ _____
<input type="checkbox"/>	bus travel from Camp only (to Winnipeg)	\$30	\$ _____

Subtotal	\$ _____
GST (5%)	\$ _____
Tuck Deposit	\$ _____
Total Fees	\$ _____
Less: Deposit (\$60 min)	(\$ _____)
Total Outstanding Fees	\$ _____

VISA/MC PAYMENT: *(Credit card payments will be processed immediately)*

Card # _____ - _____ - _____ - _____ - _____ Amount: \$ _____

Expiry Date: ____ - ____ - ____ Signature: _____

If not paying full balance now, I authorize MPC to automatically process the remainder of fees owing on June 1st Yes No

All cheques can be made payable to Manitoba Pioneer Camp.

MEDICAL INFORMATION:

Medical # _____ Personal Health I.D. # _____ / _____ / _____ Other Coverage: _____

Name of Family Physician: _____ Office Tel. #: _____

When was your camper last seen by a physician?

- Within past month Within past 3 months Within past 6 months Within past year More than a year ago

Check if your camper has any of the following special needs:

- Learning Disabilities Social Behavioural Physical
 One-on-One Support ADD/ADHD Other (please specify): _____

Check if your camper has had any of the following:

- Chicken Pox Mumps Diphtheria German Measles

Check if your camper is subject to or experiences any of the following:

- heart disease motion sickness frequent stomachaches diabetes bedwetting
 frequent headaches ear trouble epilepsy/seizures sinusitis/tonsillitis sleepwalking
 eye problems frequent colds menstrual cramps other (please specify): _____

Are camper immunizations up to date? Yes No If no, please explain: _____

Has the camper received any psychological/emotional diagnoses? Yes No If yes, please give details: _____

Please list any **allergies** your camper has, and describe reaction: _____

Is your camper a vegetarian? Yes No Please list any other special food **needs** your camper has: _____

Does your camper wear a Medic Alert bracelet? Yes No Does your camper carry an Anakit/Epipen? Yes No

Has your camper been on any medication and/or medical treatment in the past 3 months that he/she is not normally on? Yes No

If yes, please describe: _____

Please list names, dosages, and frequency of any medications that the camper is currently taking and ensure that these medications are sent in their **original packaging with the pharmacy label intact**: _____

I authorize Manitoba Pioneer Camp staff & health officers to administer **the above medications** as prescribed and/or needed:

Yes No If you are not sending these medications, please explain: _____

I authorize Manitoba Pioneer Camp staff & health officers to administer **non-prescription medications** to my child as deemed necessary:

Yes No Exceptions: _____

AUTHORIZATION: I have read the "Important Information" and "Waivers & Conditions of Enrollment" on the back of this form and agree to their terms.

PARENT/GUARDIAN SIGNATURE
(Required before application can be processed)

DATE

Upon completion and signature of this application form, please deliver to:
Manitoba Pioneer Camp 640 Broadway Winnipeg, Manitoba R3C 0X3 Fax: 204-788-1001

If you have further questions, call us at (204)788-1070, visit our website at www.manitobapioneercamp.ca, or e-mail us at mpe@pioneercamp.com. Upon acceptance, you will receive a camp information package (via email, unless a valid email address was not given) that includes an invoice for outstanding fees.

IMPORTANT INFORMATION

Cabin Mate Preference: Each camper may request a maximum of 2 friends within the same age grouping. Please consult with the other family before requesting cabin mate preferences and ask them to list your camper's name.

Tuck Deposit: Campers may buy articles such as stamps, books, t-shirts, sweatshirts, and souvenirs from our Tuck Shop. The average tuck deposit is between \$20 and \$50.

Refund Policy: Once the camper application has been accepted and processed, there will be no refund of the \$60 deposit. Additional fees will be refunded according to the following scale: remainder if cancellation notice given at least 30 days prior to start of camp session, 50% of the remainder if cancellation notice given at least 15 days prior to start of camp session, and no refund if cancellation notice given less than 15 days prior to the start of the session. For medical cancellations accompanied by a physician's certificate, the remainder of the fees will be refunded.

Family Discount: Applies to families with more than one child attending Pioneer Camp this year. Full registration fees are charged for the camper attending the most expensive session. Each additional sibling from your immediate family will receive a 10% discount on his/her registration fee. Campers attending more than one session also receive 10% off subsequent sessions of equal or lesser value.

Recruitment Discount: \$40 non-refundable "Tuck Bucks" will be credited to your tuck account for each first time camper (not a sibling) you recruit to attend Pioneer Camp this year. You must indicate the name(s) of the recruit(s) beside the "Recruitment" line on this form to receive the discount. Tuck Bucks are applied to your tuck account after the recruited camper has been accepted and registered. Recruitment discounts are non-refundable credit for the Tuck Shop only. Unspent portions will not be reimbursed as cash.

Lice Policy: In our efforts to provide the best possible experience for all our campers, it is imperative parents check their children for evidence of lice prior to coming to camp. All campers must be lice free and nit(egg) free. If a camper arrives with lice they will be asked to return home until they are lice/nit free and we will make every effort to accommodate the camper in a later session during the summer.

WAIVERS & CONDITIONS OF ENROLLMENT

1. If the camper has any physical, emotional, or behavioural need, particularly if it is a condition that would require special attention or exclude any Camp activity, describe fully on a separate sheet of paper. The Camp retains the right to dismiss any camper whose condition has not been disclosed during the application process.
2. The Camp Director reserves the right to dismiss any camper who, in his/her opinion, is a hazard to the safety and rights of others or themselves, or who appears to have rejected the reasonable controls of Camp and/or whose behaviour is placing unacceptable constraints upon the staff and their responsibilities toward other campers. Camper fees are non-refundable when a camper has been dismissed from Camp due to inappropriate behaviour or excessive demands or constraints upon staff. Camper fees are also non-refundable in the case of late arrivals or early departures.
3. In the instance that a camper is dismissed from camp for any reason, the parents/guardians are responsible to collect the camper from the Shoal Lake Landing. Should the parents/guardians be unavailable, the emergency contact assumes responsibility for pick-up of the dismissed camper, or the parent/guardian further agrees to pay for all such services and transportation as may be required.
4. While every precaution shall be taken to ensure the good welfare and protection of the applicant camper, Manitoba Pioneer Camp, its board members, directors, staff members, and employees of facilities outside of the campground are hereby released from any and all liability in the event of any accident or misfortune that may occur to the applicant camper, both on-site and while on the wilderness canoe trip.
5. The parent/guardian gives permission to Pioneer Camp to secure medical treatment and to administer camper medications and over the counter medications to the camper, while in our care, as deemed necessary by camp medical personnel. The Camp will attempt to notify the parents as soon as possible if medical treatment is required. Each camper must be covered by medical insurance. The parent/guardian agrees to be responsible for expenses relating to the purchase of medications and/or travel for medical attention.
6. The parent/guardian agrees to permit reasonable use of photos, videos or other pictures of the applicant camper in promoting the Camp or Camp activities and programs in printed media or in the camp website.
7. The parent/guardian agrees to be responsible for the payment of all fees due to the Camp by June 1, 2009. This registration is not complete until all fees are paid. Please call our office if other payment arrangements are required.
8. The use or possession of alcohol, illicit drugs, or cigarettes by campers is strictly prohibited at Camp.
9. Pioneer Camps in Canada cannot guarantee to be a "peanut-free environment". We do seek to reduce the risk of exposure and therefore do not use or serve peanuts or nut products on camp property. Please do not send any food items to or with your camper that contain nut products (this includes chocolate bars, granola bars, etc). Any items containing nut products will be confiscated and removed from the camp.
10. The medical information given is correct, to my knowledge, and the person herein described has permission to engage in all prescribed camp activities, except as noted by myself. The camp retains the right to dismiss any camper whose condition has not been disclosed to the camp staff. The signature of the parent or guardian on this form shall give the Camp Director the right to arrange for any special medical services necessary to the applicant camper's welfare and good health. The parent or guardian further agrees to pay for all such services and transportation as may be required.