



Register ONLINE
www.campkahquah.com

2012 Children's Camp Application Form
 Please complete a separate application form for each camper
PLEASE PRINT and COMPLETE BOTH SIDES

Camper's Name: (Last) _____ (First) _____ • Male • Female

Camper's Address: _____ Family Email: _____

City/Town: _____ Province: _____ Postal Code: _____

Phone Number: (____) ____ - _____ Date of Birth: ____/____/____
 Month Day Year

Parent / Guardian's Name: _____

Phone Numbers: Home (____) ____ - _____ Cell # (____) ____ - _____

Parent / Guardian's Name: _____

Phone Numbers: Home (____) ____ - _____ Cell # (____) ____ - _____

Have you ever been to a Camp Kahquah summer camp program before: Yes No

Indicate ONE choice of cabin mate: _____

We will try to put friends in the same cabin, but cannot guarantee it.
 Both campers must indicate that they would want to be in the same cabin

How did you first hear of Camp Kahquah?

Friend Brochure Church Internet Other

4 Bring a Friend? _____

Let us know if you are bringing a friend to Camp this summer and it is their first time at Kahquah.
 We want to share a \$5 tuck credit with you.

Home Church (if attending): _____

CHILDREN'S CAMP Check
 () transportation mode, and if applicable, the most convenient bus stop

To Camp

Own Vehicle
 Camp Bus
 Wainfleet
 Burlington
 King City
 Barrie

From Camp

Own Vehicle
 Camp Bus
 Wainfleet
 Burlington
 King City
 Barrie

Disclaimer Information - Parent or Guardian Consent

- My child is in good physical and emotional health, and amenable to normal camp authority
- The Camp Director reserves the right to dismiss a camper who is, in his/her opinion, a hazard to the safety and rights of others, or appears to him/her to have rejected reasonable camp controls
- I, as a parent or guardian, have legal custody of the child applying to Camp Kahquah and if applicable have informed the camp of any conditions of custody. The signature on the registration form signifies that both parents/guardians are in agreement with the conditions of enrolment.
- Care is taken for the safety and good health of campers, but in the event of an accident or sickness, Camp Kahquah, including the Board of Directors and staff, and the owners and the employees of facilities outside of the campgrounds are hereby released from any liability. Each camper must be covered by Provincial Health Insurance or equivalent medical insurance.
- In the event that a camper requires special medication, X-ray or treatment beyond that which is available at Camp, the parents/guardians will be notified immediately and will be charged with the additional expense of transportation and special care.
- In the event of an emergency, I hereby give permission to the physician selected by the Camp Director to hospitalize, secure treatment for, and to order injection, anaesthesia or surgery for my child as named above.
- Permission is given for Camp Kahquah to use any image or likeness of my child for their promotional material.
- Camp Kahquah requires that campers who have potentially life-threatening conditions, such as peanut allergies, to be able to manage their exposure to those substances, provide two sets of medication and be familiar with its use.
- In case of withdrawal during the Camp on a physician's order, two thirds of the remaining term will be refunded. No refund will be made for dismissals due to disciplinary action, late arrivals or early departures.
- The deposit of \$75 per week is non-refundable for cancellations made after May 15, 2012. For cancellation prior to May 15, there is a \$25 cancellation fee. Less than two weeks prior to the program date, all program fees become non-refundable, unless written explanation from a doctor is received, in which case, only the deposit is non-refundable.
- In the event that any requested camper busing is cancelled, there is no refund of the busing fee two weeks prior to the camp. Also, a \$10 administrative fee is added for each change made to busing two weeks prior to the camp.
- Programs that do not receive a minimum number of registrations will be cancelled and fees paid will be fully refunded.
- The information on this form will only be used by Camp Kahquah for the specific purpose of providing your child with a memorable experience. I understand that this information will not be passed to any other group or used for any other purpose.
- I have read and understand all pages of the brochure and this application form.

Signature of Parent or Guardian: _____ Date: _____

Required to Process Application

PLEASE RETURN ALL COMPLETED FORMS
(APPLICATION - FEE CALCULATION - MEDICAL)
 Camp Kahquah, 1230A Nipissing Rd, RR#1, Magnetawan, ON, POA 1P0
FAX: (705) 387-0045 ONLINE: www.campkahquah.com



2012 Medical Form

Please complete a separate application form for each camper - PLEASE PRINT
Form must be complete and signed by Parent/Guardian or Applicant (if 18 years of age)

Camper's Name: (Last) _____ (First) _____ • Male • Female

Ontario Health Card Number: _____

Camper's Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Home Phone Number: (_____) _____ - _____ Date of Birth: ____/____/____
Month Day Year

Parent / Guardian Name: _____ Cell Phone Number: (_____) _____ - _____

Parent / Guardian Name: _____ Cell Phone Number: (_____) _____ - _____

Emergency Contact (Other than Parent): _____ Relationship: _____

Phone Number of Emergency Contact: (_____) _____ - _____

Family Doctor: _____ Phone: (_____) _____ - _____

Medical History

- Diabetes
- Heart Trouble
- Asthma
- Epilepsy
- Kidney Trouble
- Bed Wetting
- Sleep Walking
- Fainting

Allergies

- Hay Fever
- Eczema
- Bee Sting
- Food
- Drug:

| |
|---|
| Please provide any necessary relevant details for the nurse: |
| |
| |
| |
| |
| |

| |
|--|
| Please list other medical conditions or allergies |
| |
| |
| |
| |

Prescription Medications

| Medication | Dosage | Times Taken |
|------------|--------|-------------|
| | | |
| | | |
| | | |
| | | |

Important Note: All medications must come in their ORIGINAL container. The camp nurse is responsible for both storing all medications in a locked cabinet as well as administering them. Prescription medications must be for the child indicated on the label and all labels must have proper dosages detailed. Any outdated medications or those not in their original containers will NOT be administered to any campers while they are in the care of Camp Kahquah. The camp must be notified in writing if the camper is exposed to any communicable disease during the 4 weeks prior to camp, or if the camper's medical status changes

Food Allergy Policy: Our desire is to create a safe environment for children. We will make reasonable efforts to ensure that your child does not have a food allergy attack while at Camp Kahquah. While we are not a peanut-free location, our policy is to reduce the use of peanut products during NOVA. During the other weeks, our goal is to help children self-manage their condition. For more information or concerns call the camp at 705-387-3923.

Are there any activities at camp in which the applicant should NOT participate?

By my signature, I declare that the medical history attached is complete and accurate and I give my permission for a physician selected by the appointed Camp Director to hospitalize, secure proper treatment for, and to order injection, anaesthesia or surgery for my child named above in the event of a medical emergency and for the family doctor to be contacted in such a case.

Signature of Parent/Guardian _____ Date Signed: _____

(or applicant if 18 years of age or over)



Calculation of Fees - CHILDREN'S CAMP

Please complete a separate application form for each camper

Camper Name: _____

Select the program and date

| <input checked="" type="checkbox"/> | Program | Age | Date | Cost |
|-------------------------------------|---------------------|--------------|----------------|-------|
| | NOVA | 8 - 11 | July 1 - 7 | \$390 |
| | QUEST | 9 - 12 | July 8 - 14 | \$410 |
| | BLAZE | 10 - 13 | July 15 - 21 | \$410 |
| | SUMMIT | 11 - 14 | July 22 - 28 | \$410 |
| | Algonquin Adventure | 11 - 14 | July 22 - 28 | \$410 |
| | BRAVO | 11 - 14 | August 19 - 25 | \$410 |
| | ZENITH | Grade 9 - 12 | August 26 - 29 | \$200 |

| | | |
|--|-----|-----|
| Program Fee before Tax (add total cost of each program) | [A] | |
| Changeover weekend fee - available between Blaze and Summit only \$25 | [B] | |
| Coach Transportation : \$75 return or \$50 one way | [C] | |
| Total Fees (A+B+C+) | | [D] |

| | | |
|---|-----|-----|
| Full Payment by March 2, 2012 : Save \$20 per week | [E] | |
| Come for an earlier week and save \$75 on Algonquin Adventure | [F] | |
| Come for an earlier week and save \$75 on Bravo | [G] | |
| Come for Crew, LIT, or staff and save \$20 on Zenith | [H] | |
| A 2nd Child in same immediate family will save \$25 per week | [I] | |
| A 3rd Child (or more) in same immediate family saves \$50 per week | [J] | |
| Pastors Discount \$200/child/week (Zenith \$100) no other discounts apply | [K] | |
| Total Discounts (E+F+G+H+I+J or K) | | [L] |

| | | |
|--|--|-----|
| Total Program Fee after Discounts (D-L) | | [M] |
|--|--|-----|

Taxes

| | | |
|---|-----|-----|
| HST : 13% of Total Program fee (0.13 x [M]) | [N] | |
| Program fee plus tax (M + N) | | [O] |

| | | |
|---|--|-----|
| Optional Tuck Prepayment | | [P] |
| Please keep my child's Tuck change as a Camper Assistance Fund Donation (x in box) | | |
| Optional Camper Assistance Donation (Tax deductible) | | [Q] |
| Optional Site Development Donation (Tax Deductible) | | [R] |

| | | |
|----------------------------------|--|-----|
| Grand Total Due (O+P+Q+R) | | [S] |
|----------------------------------|--|-----|

Payment Plans

- [] Plan # 1 : Full Payment of [S] by ___ credit card or by ___ cheque payable by March 2nd (early bird advantage)
- [] Plan # 2 : Full Payment of [S] by ___ credit card or by ___ post dated cheque (enclosed) payable by June 15
- [] Plan # 3 : Monthly payment plan of [S] by ___ preauthorized credit card withdrawals or by ___ post dated cheques (enclosed) ___4 payments ___5 payments ___6 payments

If payments is being made by a third party, please enclose their payment information with application

***Financial Assistance is available to those who qualify. Please contact the office @ 705-387-3923.**

Credit Card Information [] Visa [] Mastercard
 Account number: _____ Name on Card _____
 Expiry date _____ / _____ Signature (required) : _____
 Mth year



Camp Kahquah offers a wide selection of programs and there are several options in applying

Applying to Children's Camp

NOVA, QUEST, BLAZE, SUMMIT, Algonquin Adventure, BRAVO, ZENITH

Application Options:

- Application form with brochure send to camp
- Application form can be downloaded from the camp's website send to camp
- Apply on line: www.campkahquah.com

Applications sent to the camp should use the address:

Camp Kahquah, 1230A Nipissing Rd, RR#1, Magnetawan, ON, POA 1P0

Applying to Leader in Training (LIT), Crew or for a Staff position

Application Options:

- An application form can be downloaded from the camp's website send to the camp
- email kahquah@gmail.com

Be sure to include your name and address when you make your request

Applications for LIT, Crew and Staff position are to be sent to the Camp:

See above Address

STAFF Positions

Sign up for a week, or better still, apply for the whole summer

Staff Training Week: June 24 - June 30

There are a number of different positions that need to be filled:

- Cabin Leaders: 18 years of age OR completed a Leader in Training program
Waterfront: Bronze Cross OR National Lifeguard
- Maintenance, housekeeping & Kitchen:
Completion of the Crew program will be given preference
- Assistant Cook: Experience in a kitchen
- Leadership position: Experience at Camp Kahquah with proven leadership skills

Leader In Training (LIT)

June 24 - July 28

Program Requirements

1. Ages: 16, 17 (By December 31, 2012)
2. Minimum completion of grade 9
3. Demonstrated aptitude to be a leader
4. Demonstrated love for young people
5. Good physical condition
6. Ability to work well with others in a variety of situations
7. A keen desire to learn and teach
8. A lifestyle that is consistent with camp expectations
9. An active and growing relationship with Jesus Christ

Crew

Two sessions are available - attendance throughout the two week program is required .

Session 1: July 1 - 14 Session 2: July 15 - July 28

Program Requirements

1. Ages: 14, 15 (By December 31, 2012)
2. Good physical condition
3. Demonstrated desire to serve
4. A keen desire to learn
5. Ability to work well with others in a variety of situations
6. A lifestyle that is consistent with camp expectations
7. An active or seeking relationship with Jesus Christ

Applicants for both Crew and LIT should be aware that these are very popular programs
The Camp will begin notifying successful applicants after March 15, 2011 Applications
received after this date will be processed as long as space is available
For more information: www.campkahquah.com