2025 Stoney Lake Bible Camp Registration Form

		First name		Birthday: M	D Y	Age
Gender: M F	Health N	<i>First name</i> [umber	Parents en	Britiday: W nail	_ D 1	
		needs:				
Medical requiren	nents:					
Parents Name:						
Parents Address :		City:		Prov: P C	ode:	
Parent Emergency contact # Home W Alternate emergency contact name and # Please provide an alternate emergency contact – we will c		Vork Cel		II		
Alternate emerge	ency contact name a	and #	1	Pn	one #	1
	ession you wish to		Cont	Work Cre Session	w Sessions (I	Must be 14 or Grade 9)
Session	Age	Dates	COST			<u>Cost</u>
Junior One	8 – 11	July 6 – July 11 July 13 – July 18 July 20 – July 25 July 27 – Aug 1	\$425.00		July 6 – Jul	
Jun Hi One	12 – 14	July 13 – July 18	\$425.00	SWC 2	July 20 – A Aug 5 – Au	Aug 1 \$330.00
Junior I wo	8-11	July 20 – July 25	\$425.00	SWC 3 SWC 4		
reen	14 - 18	July 27 – Aug 1	\$425.00	SWC 4	Aug $17 - A$	Aug 22 \$200.00
Squirt	7 – 9	Aug 5 – Aug 8 Aug 10 – Aug 15	\$288.00			
Jun Hi I wo	12 – 14	Aug 10 – Aug 15				
Junior Three	8 - 11	Aug 17 – Aug 22	\$425.00			
	minimum of \$75 d	•				
Choose <i>three</i> skil Canoeing Climbing W	lls I want to partici Kayaking	pate in: Archery _DramaSurviva arn Motorized V	al training S	Sports Marks	manship	do not choose skills
Choose <i>three</i> skilCanoeing Climbing W Rocketry (lls I want to partici Kayaking Vall Petting Ba \$30.00) Hando r about Stoney?	pate in: Archery _DramaSurviva arn Motorized V	al training \$ Water Sports (\$6:	Sports Marks 5.00)Paintl	manship	do not choose skills
Choose <i>three</i> skilCanoeing Climbing W Rocketry (! How did you hea Name of a friend Payment: Credit Card:	lls I want to partici Kayaking 'all Petting Ba \$30.00) Hando r about Stoney? that I wish to be ca \$75.00 Deposit Full payment b E-Transfer (se Full payment b M Card Visa	pate in: Archery _DramaSurviva arn Motorized V crafts (\$20.00) abin mates with: t by cheque by cheque (Must be p nd to slbcinv@gmai by credit card (comp	al training Water Sports (\$6: paid in full at leas l.com; Stoney is lete payment onl	Sports Marks 5.00)Paintl St two weeks before set up with autom y.)	manship pall (\$60.00) re start of cam atic deposit)	do not choose skills Marksmanship (Pellette Axe throwing)
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IN CONSIDERATION of being permitted to participate in any way at Stoney Lake Bible Camp, (hereafter known as ministry point) operated by One Hope Ministries of Canada, I acknowledge, understand, and agree:

- 1. Participation in activities could result in possible injury. Despite precautions taken by the ministry point, accidents and injuries may occur. By signing this form, I assume all risks related to the use of any and all spaces used by the ministry point.
- 2. To release from responsibility, the ministry point, including all missionaries, full-time and part-time, paid or volunteer, and the facilities used from any cause of action, claims, or demands now, and in the future that might arise out of the participant's participation in activities at Stoney Lake Bible Camp or from the physical risks associated with the activities.
- 3. I accept all risks relating to such activities including personal injury such as: cuts, sprains, scrapes, bruises, fractures, broken bones, concussions, death, or any personal property damage/loss, which may occur on the camp premises. I understand these risks and will not hold Stoney Lake Bible Camp liable for any such injury.
- 4. Furthermore, I agree to obey all the ministry point rules and take full responsibility for my behavior in addition to any damage I may cause to the facilities utilized by the ministry point.

I have read this <i>Informed Consent and Ass</i> and voluntarily.	sumption of Risk Agre	ement, fully understand in	ts terms and the risks I am assum	ing by signing it, and sign it freely
Printed Name of Camper (only if above 13	years of age)	Signature of Camper		Date of Birth
Printed Name of Parent or Guardian	Signature of Parent	or Guardian	Date	
PARENT/GUARDIAN PE	RMISSION FORM	I - PLEAS	SE READ PRIOR TO REGI	STERING -
In case of emergency, I understand every effort will be licensed emergency and health care personnel to provadvice, treatment and/or equipment are required, I ag the information on this form may be disclosed to such requiring medical treatment, such treatment may be pall known health issues of my child have been stated. I agree to allow photographs or video of camp activity photographs and videos with ministry partners of One I have read and understood the terms of this agreement terms. I confirm that the participant [my child] is phy writing.	vide treatment, service ree to accept financial hemergency and health procured for the particulation to the camp. I will not ties, which may include the Hope Canada.	s and transport necessary responsibility for fees in th care personnel. In the e- ipant without legal or fina- tify the camp if my child e my child, to be used in IG MY CHILD(REN) to	to maintain the health of my chi excess of provincial and or priva- event of illness, accident, emerge- ancial obligation to Stoney Lake is exposed to any infectious dise- any and all camp promotional m	Id. In the event medication, medical ate medical insurance. I agree that ncy, or any other circumstance Bible Camp and One Hope Canada. eases prior to arriving at camp. aterial including the sharing of untarily agreeing to abide to these
Camper Name:				
Parent/Guardian Signature:			Date:	
I agree to allow Stoney Lake Bible Camp to share my	y name, address & pho	one number with staff & c	churches affiliated with the camp	
Stoney Lake Bible Camp reserves the right to request manner.	t any participant to wi	thdraw from their camp it	f the participant is not acting in a	n appropriate and responsible
Stoney Lake Bible Camp reserves the right to cancel	any week of camp and	d give a 100% refund.		
We count it a privilege that you sent your son or dauge friendships being formed! We have an amazing summer doing and answer any questions they may have about (www.insafehands.ca) we are committed to honourin (Facebook, Twitter, phone calls, etc). Our staff would indicate whether or not you give permission to our staff whether or mail (please see camp website for contact camp director.	ner staff team, and our the topics discussed of g you as a parent/guar d be honoured to be ab aff to stay in contact v	r staff loves to stay conne during chapel session and dian and to asking your p le to continue to stay inv with your son or daughter.	cted with their campers throughd cabin devotionals. As part of ou permission before any contact occolved in your child or youth's lif If you wish to discuss this further	out the year to hear how they are in child and youth protection policy curs between campers and our staff in after camp. Please sign below to er please contact the camp director
Child's Name:				
Parent/Guardian Signature:			Date:	