



Box 99, Austin, MB, R0H 0C0
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**REGISTER before
January 31st and
SAVE!**

CAMPER INFORMATION

First Name: _____ Last Name: _____
 Address: _____ Apt. #: _____
 City: _____ Prov: _____ Postal Code: _____
 Home Phone #: _____ Camper's Email: _____
 Camper's Date of Birth: MM-DD-YYYY Age at Camp: _____ Gender: M F
 Room/Group mate choice: (only two requests - should be same age) _____

PARENT / GUARDIAN INFORMATION (whom the camper is living with)

Camper lives with: Both Parents Mother Father Guardian Foster Parent Joint
 Mother/Guardian: (Full Name) _____
 Cell/Bus #: _____
 Father/Guardian: (Full Name) _____
 Cell/Bus #: _____
 Parent Email: (Confirmation will be sent to this address) _____
 3rd Party Emergency Contact: _____
 Relation to Camper: _____ Phone #: _____
 How did you learn about CSR? Relative Friend Church Website Facebook Other
 Referred by: (Please give friend or relative's name) _____
 Has camper or sibling attended CSR camp before? Yes No Location? _____
 Is there a brother/sister attending this year? Yes No Name(s): _____
 Does your family participate in a church or faith community? Yes No
 Name of church or faith community if 'Yes': _____
 Has either parent/guardian been involved with CSR? Yes No
 If yes, please indicate your type of involvement:
 Camper Staff member Volunteer Year(s)? _____

CAMP SESSIONS

Please select 1st, 2nd & 3rd choice of week.

TEEPEE VILLAGE

		AGE	RATE	✓
1	July 8-11 (Mini Week)	6-8	\$185	
1	July 8-14	6-9	\$370	
2	July 15-21	6-9	\$370	
3	July 22-27 (Ends Friday)	6-9	\$350	
4	July 29 - August 4	6-9	\$370	
5	August 6-11 (Starts Monday)	6-9	\$330	
6	August 12-18	6-9	\$370	
8	August 26-31 (Ends Friday)	9-11	\$350	

WESTERN TOWN

1	July 8-14	9-12	\$370	
2	July 15-21	9-12	\$370	
3	July 22-27 (Ends Friday)	10-13	\$350	
4	July 29 - August 4	12-14	\$370	
5	August 6-11 (Starts Monday)	10-12	\$330	
6	August 12-18	12-14	\$370	
7	August 19-25 (All Girls)	12-14	\$370	
8	August 26-31 (Teen Week)	14-17	\$350	

TEENS & LEADERSHIP

WIT - Wrangler In Training

1-3	July 8-27	15-17	\$690	
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LIT - Leaders In Training

1-4	July 8 - August 4	15-18	\$740	
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Route 4:13

5-6	August 6-18	14-15	\$690	
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Boys Wilderness Camp

7	August 19-25	13-16	\$370	
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HORSE SPECIALTY

Horse Lover's Program

July 29 - Aug. 4 (Beginner/Intermediate)	12-14	\$370	
August 12-18 (Beginner/Intermediate)	12-14	\$370	
August 26-31 (Advanced)	14-17	\$370	

For more information go to www.csranchsprucewoods.ca



We respect your privacy and never sell, trade, rent, or otherwise share personal information. All personal information received by InterVarsity is handled with strict confidentiality for the purposes of enrolling your child in InterVarsity Circle Square Ranch and for subsequent communication with you. If you have questions or concerns, please contact us at 204.723.2669.

Office Use	<input type="radio"/> Credit Card	Date Rec'd: _____
	<input type="radio"/> Cheque	Amt Rec'd: _____
	<input type="radio"/> Cash / Debit	Spns. Amt: _____ PD Date: _____
		PP Tuck: _____ Bal Due: _____

CALCULATION AREA

Check here if registering for more than 1 week.

(see Camp Sessions) Camp Fee	
(see box) Less Any Discounts	
5% GST	
subTotal	
(optional) Prepaid Tuck We recommend \$20-\$25	
Donate to CSR Spruce Woods Scholarships and help another child enjoy the CSR experience. Income tax receipts will be issued for donations over \$15.	
Total	

Early Bird Discount
Register before January 31st and save \$50. (Does not apply to Mini Week Teepee Village)

Family Discounts
2nd child \$30 off
3rd child \$60 off

Multiple Week Discount
2nd Week \$30 off

Bring a Friend Offer
(not calculated on this form)

For each 1st time camper that you refer to CSR, we will award you a \$50 rebate for 2018 or a \$75 credit toward 2019. Refer five & your week is free!
(Your name must be on their application to receive rebate. Siblings are not eligible as 1st time friends. Non-applicable to agency paid fees.)

Go to:
www.csranchsprucewoods.ca/friend

SEND PAYMENT AND COMPLETED APPLICATION FOR PROCESSING

1. Full payment only when using Visa or MasterCard.
2. If paying by cheque, full payment or a deposit of \$100 per application, with the balance of fees enclosed as post dated cheque, dated no later than June 1, 2018. There will be a fee charged for NSF cheques.
3. After June 1, 2018 full payment to be made by credit card or money order.

- Cheque payable to:
Circle Square Ranch
- Credit Card
- MasterCard
- Visa

Card Number: _____

CW Code: _____ Expiration Date: _____

Cardholder Name: _____

Signature _____

HEALTH & SAFETY

Health and Safety are emphasized at all times at Circle Square Ranch.

We have a qualified medical person on staff and emergency services available within minutes of the camp property.

Camper's Health Card #: _____ Family #: _____ All campers must have medical insurance.

Please answer the following questions. If applicable, attach a detailed note for any that you answer yes:

- Does your child have any allergies (food, drug, environmental)? Yes No If yes, please list: _____
- Does your child have any special health concerns? Yes No If yes, please list: _____
- Does your child have any conditions (mental, physical or behavioural) that require medication or treatment while at camp? Yes No
Please attach detailed note on the condition(s), medication(s) and dosage if 'Yes'. Due to the structure of our program, and for the benefit of your child, Circle Square Ranch requests that medication required throughout the year be sent with your child to camp.
- Is your child on a medically prescribed meal plan or dietary restriction? Yes No If yes, please explain: _____
- Does your child have emotional or behavioural issues that the camp should be aware of? Yes No (If yes, please attach/provide details)
- Does your child have any conditions (mental, physical or behavioural), which requires one on one staff support? Yes No (Additional fee may apply. Please contact office for availability.)
- Are immunizations up to date including tetanus booster? Yes No Conscience or Religious Exemption
- Date of last Tetanus Booster: MM-DD-YYYY *If immunizations are not up to date, please plan to have them made current before camp.

Has your child experienced, or is currently experiencing, any of the following conditions: (Please check all that apply & provide a detailed note)

- ADD/ADHD
- Asthma
- Bedwetting
- Concussions / Blackouts / Fainting
- Stomach, Digestive or Constipation / Diarrhea
- Mental Health Issues/ Depression
- Eating Disorder
- Epilepsy / Seizures
- Headaches
- Speech, Vision or Hearing Problems
- Homesickness
- Sleep Troubles / Sleep Walking / Nightmares / Terrors
- Restrictions on activity
- Self Harm
- Other

Authorization for Treatment

1. I hereby authorize the camp personnel to handle any medical problems with my child during his/her stay at camp.
2. In the event that a camper requires special medication, x-ray, or treatment beyond that which is possible at camp, we will attempt to notify the parents as soon as possible. The parent/guardian will be responsible for any additional expense for additional care or transportation.
3. In case of surgical emergency, I hereby give my permission to the physician selected by the Camp Director to hospitalize, secure proper treatment for, and order injection, anesthesia, or surgery for my child named on this application.
4. I will inform the camp if my child has had any changes in health, including any communicable disease within the three weeks prior to his/her stay at the camp.
5. InterVarsity Circle Square Ranch has my permission to contact my family doctor as necessary to ensure the best care for my child/ward.
6. I give permission to InterVarsity Circle Square Ranch to give the Over the Counter medications checked off.

- Appropriate Cold Formula
- Appropriate Allergy Formula
- Dimenhydrinate (Gravol)
- Antidiarrheal Formula
- Acetaminophen (Tylenol)
- Ibuprofen (Advil/Motrin)
- Antacid

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. Each camper must be covered by medical insurance prior to arrival at camp and must extend throughout their entire time at camp.

Doctor: _____ Phone #: _____

Signature of Parent / Guardian _____ Date MM-DD-YYYY

CAMP INFORMATION

Fee includes all meals while at camp, housing, use of all recreational equipment and facilities, instruction in activities, and awards.

Fee does not include transportation to and from the camp or tuck shop purchases. We do not provide weekend accommodations for 2 week campers.

Financial assistance is available for those who qualify. Assistance is at the discretion of the Camp Director. Contact the office for information and a scholarship application. The deadline for applications is June 1, 2018.

Nut/Peanut Policy: InterVarsity Circle Square Ranch cannot guarantee to be a nut/peanut free environment. We do seek to reduce the risk of exposure and therefore do not use or serve peanuts, peanut products or tree nuts on camp property. Nuts or products containing nuts will not be available in our Tuck Shop(s). However the food we purchase may contain traces of nut products. 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 removed from the camp.

Cancellation Policy: If you cancel more than two weeks prior to the start of camp, you will get a full refund less \$75/week administration fee. If you cancel less than two weeks prior to the start of camp, you will get NO REFUND (includes camp fees, out-trip fees, and transportation fees) except for medical reasons with a note from a doctor. In that case, you will get a full refund less \$100/week administration fee. No refund will be made for dismissals due to disciplinary action, late arrivals or early departures. Withdrawal during camp on physician's orders will result in the value of fees for the unexpired term being refunded.

Confirmation of Enrolment and camp information will be sent to the email or mailing address indicated on the application upon receiving your completed registration and payment. Final acceptance of applicant is at the discretion of the Camp Director.

CONDITIONS OF ENROLMENT

1. The parents/guardians submitting this application are those having legal custody over the child. Conditions of custody, if applicable, will be fully communicated in writing to Inter-Varsity's Circle Square Ranch, including a photocopy of the section of any court order referring to visitation rights.
2. The Camp Director reserves the right to dismiss a camper who, in the Director's opinion, is a hazard to the safety and rights of others, 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. This may range from missing an activity to complete dismissal depending on the situation. In the instance that a camper is dismissed from camp for any reason, the parents/guardians are responsible for pick-up of the dismissed camper.
3. If the camper has any physical, emotional, developmental or behavioural need, particularly if it is a condition that would require special attention or exclude the camper from any camp activity, describe fully on a separate sheet of paper. InterVarsity Circle Square Ranch retains the right to dismiss any camper whose condition has not been disclosed during the application process.
4. I, the parent/guardian of the herein named participant, release Inter-Varsity Christian Fellowship of Canada and Circle Square Ranch, its trustees, directors, corporation members, staff and agents from any loss, personal injury, accident, misfortune or damage to the herein named or his/her property, with the understanding that reasonable precautions shall be taken to ensure the health and safety of the herein-named camper. This release is for both while the camper is on site and any camp-related off-site trip/activity. Each camper must be covered by Provincial Health Insurance or equivalent medical insurance prior to arrival at camp and must extend throughout their entire time at camp.
5. The parent/guardian agrees to permit reasonable use of photos, videos or other pictures of the applicant camper in promoting InterVarsity Camps and/or camp activities and programs, and/or InterVarsity in general in printed and/or electronic media.
6. InterVarsity Circle Square Ranch encourages our staff to keep in contact with campers periodically throughout the year. I the parent/guardian permit such contact.
7. I give my permission for InterVarsity to communicate camp information or registration opportunities to me electronically.
8. The parents/guardians hereby agree to reimburse InterVarsity Circle Square Ranch for any wilful damages caused by the applicant camper.
9. The use or possession of alcohol, illicit drugs, or cigarettes by campers is strictly prohibited.
10. The parent/guardian agrees to be responsible for the payment of all fees due to the camp by June 1, 2018. This registration is not complete until all fees are paid.

I have read and understand the Conditions of Enrolment, including the Cancellation Policy and Camp Information and hereby accept the conditions listed.

Signature of Parent / Guardian

MM-DD-YYYY

Date