

## MEDICAL REPORT

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Allergies or Physical Disabilities/Special Needs?  
(Bedwetting, Hyperactive, headaches, earaches, etc)

\*\*\* A doctor's report should be included for any serious medical conditions.

\*\*\*\*All medications must be in its original container and labeled as to type and dose.

AHC Number: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_

Doctor's Phone: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Parents Phone: (H) \_\_\_\_\_

(W) \_\_\_\_\_

(C) \_\_\_\_\_

### Emergency Contact (Other than Parents)

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

In case of emergency, I understand that every effort will be made to contact the parent or guardian of the camper. In the event that I cannot be reached, I hereby give permission to the physician selected by the Director to hospitalize and secure proper treatment for my child. I understand that in an emergency my child may be transported in a personal vehicle and I hereby waive my right, to any personal claim against the camp, its employees or volunteers.

Parent's Signature

## ABOUT THE CAMP

### HISTORY

Camp Mackinicholea has been operating on its present site as a non-profit society since 1952. It is run as a United Church Camp open to all faiths and denominations. Over the last 50 years, generations of individuals, families and groups have participated in building a rich legacy of history and tradition.

### TODAY

By combining a wealth of history with innovative and dynamic programming, Camp Mack is striding forward. With the focus on outdoor activities, the Camp is perfectly situated on a beautiful peninsula surrounded by the clear water of Long Island Lake. We offer an exciting program in July and August that includes water sports, nature skills, adventure games, Christian Fellowship and team building experiences. The camp is also available for rent by families, schools and community groups. A wide variety of groups have enjoyed our beautiful site and excellent facilities for outdoor recreation, family reunions and retreats. If you, your family or organization are interested in a unique experience at Camp Mackinicholea, call us to see what we can offer you.

### MISSION

Our Mission is to provide campers of all ages with the opportunity to experience God by:

- \* Exploring with respect the wonders of creation
- \* Building and renewing friendships
- \* Enjoying safe and challenging recreation
- \* Growing in faith in a Christian community

### NEED MORE INFORMATION???

Robin Young Phone: (780) 674-2274

Fax: (780) 674-8836

[www.campmack.co.nr](http://www.campmack.co.nr)

A.C.A. Accredited



## CAMP MACKINICHOLEA 2005

**CRAFTS  
COOK-OUTS  
HIKING  
SWIMMING  
CANOEING  
BOG-HOPPING  
SINGING  
VESPERS  
OUT-TRIPS  
CAMPFIRES  
GAMES  
NEW FRIENDS  
SPECIAL EVENTS  
WORSHIP  
CHRISTIAN FUN &  
FELLOWSHIP**



**CAMP DATES**

**MINI CAMP..... \$60.00**

*For campers finished grades 1, 2, 3:  
Swimming, Crafts, Games, special Events,  
and a whole lot of fun!*

**Mini Camp A (mini & parent)**

July 1st (10:00am) - July 3rd (10:00am)  
*To make those little ones more comfortable at  
camp, bring along a parent for some good one-on –  
one time together.*

**Mini Camp B**

July 27 (10:00am) - July 29 (10:00am)

**JUNIOR CAMP ..... \$135.00**

*For campers finished grades 4, 5, 6:  
Swimming, Overnights, Crafts, Games Special  
Events and fun, fun, fun!*

**Junior Camp A**

July 3 (4:00pm) - July 8 (1:00pm)

**Junior Camp B**

July 10 (4:00pm) - July 15 (1:00pm)

**Junior Camp C**

Aug. 1 (4:00pm) - Aug. 6 (1:00pm)

**MADD CAMP ..... \$210.00**

*For campers finished grades 7, 8, 9:  
Swimming, Canoeing, Outdoor Adventures, Crafts,  
Archery and lots more.*

**MADD CAMP**

July 17 (4:00pm) - July 24 (1:00pm)

**CIT TRAINING** (Must be 14yrs. or older)

To be announced.

**HOW TO REGISTER**

Please make cheques payable to:

**LONG ISLAND LAKE SOCIETY**

**MAIL TO:** Robin Young  
RR.# 1  
Pickardville, AB  
T0G 1W0

Camps fill on a **first come basis**. To avoid disappointment, **Register early**, preferably before June 1, 2005. A note to confirm registration, a list of things to bring and directions to camp will be sent to each camper. Call 674-2274 for registration inquiries.

**CANCELLATIONS AND REFUND POLICY**

**Cancellations and NSF cheques are subject to a \$20.00 service charge. There will be no refunds on cancellations after June 15, 2004, unless for medical reasons and must be accompanied by a medical certificate.**

**MEMBERSHIPS AND DONATIONS**

Donations to Camp Mackinicholea are always welcome and are tax deductible. Memberships per year are:

Family .....\$20.00

Memberships are a great way to support camp and to stay informed about our activities throughout the year. They are available from the registrar and at the camp.

**GROUP RENTALS**

The camp may be rented by groups in the spring and fall. For more rental information contact:

Deirdre McCormick (780) 307-2252

**REGISTRATION FORM**

Name \_\_\_\_\_

Address \_\_\_\_\_

Town \_\_\_\_\_ Postal Code \_\_\_\_\_

Date of Birth \_\_\_\_\_  Male OR  Female

Grade Completed \_\_\_\_\_

I wish to come to (select camp):

1st Choice: \_\_\_\_\_

2nd Choice: \_\_\_\_\_

Roommate Preferred: \_\_\_\_\_

CAMP CANNOT FUNCTION WITHOUT THE MANY VOLUNTEERS WHO GIVE THEIR TIME AND ENERGY.

**ARE YOU ABLE TO VOLUNTEER???**

Name: \_\_\_\_\_

PH #: \_\_\_\_\_

**FOIP (Freedom of Information and Privacy Act)**

I consent that my child's picture may be used in media or presentation material for or about Camp Mackinicholea.

Signature \_\_\_\_\_

PLEASE SEND: (check boxes that apply)

Registration/Medical Form  Tax Deductible Donation

Total Camp Fee

Total Amount Enclosed \$ \_\_\_\_\_

