



The «Coeur-à-Coeur Congenital Camp» will take place on September 7, 8 and 9th 2007.
All activities and facilities will be provided by:

CAMP B'NAI BRITH INC.
1 CARRÉ CUMMINGS SQUARE #232
MONTRÉAL, QUÉBEC H3W1M6
phone # 514-735-3669
fax # 514-735-8197
www.cbbmtl.org

IMPORTANT:

A. Your application will be processed only once you have complied with the following requirements:

1. Please print clearly and fill out the forms **COMPLETELY**.
2. All forms must be **signed** in the appropriate places and returned to the camp office...Signatures are required on:
page 2 - at bottom
page 3 - Camp Agreement (2 places)
page 4 - Camper Rules
3. A **\$25.00 non-refundable** registration fee must be enclosed with each application.
4. Enclose Camp Fees: **\$65 for children from 6-12 years old**
\$130 for all other campers

For parents that wish to accompany their children at the camp, must also complete the registration form

PAYMENT SCHEDULE:

Complete payment of fees must be paid in full by July 2nd, 2007.

If cancellation occurs after June 15th, 2007, ***NO*** refund will be given except for medical reasons. A doctor's note will have to be shown.

All signed registration forms and complete payment fees must be sent: Camp B'NAI BRITH Inc., 1 Carré Cummings Square, # 232, Montréal, Québec, H3W1M6

For further information, please contact the Maude Unit Team at 514-934-1934 ext. 42691.

CAMPER APPLICATION FORM – 2007

CAMPER'S FULL NAME: _____ MALE/FEMALE _____

ADDRESS _____ APT. # _____

CITY _____ PROVINCE _____ POSTAL CODE _____ TEL. NO. _____

Date of Birth ____/____/____ Age as of June 30, 2007 _____
Month/ Day / Year

Mother's Name _____ Cellular phone # _____

Bus. Tel. No. _____ E-mail address: _____

Father's Name _____ Cellular phone # _____

Bus. Tel.No. _____ E-mail address: _____

Marital Status: Married _____ Divorced _____ Widowed _____ Separated _____ Single _____

Camper Living With: Both Parents _____ Mother _____ Father _____ Other _____ Legal Custody _____

***** **PLEASE PROVIDE DOCUMENTATION OF LEGAL CUSTODY** *****

IN CASE OF EMERGENCY, PLEASE GIVE THE NAMES, ADDRESSES AND PHONE NUMBERS OF **TWO** PEOPLE **OTHER** THAN THE PARENTS OR GUARDIAN WHO **LIVE IN MONTRÉAL**:

Name _____ Home Tel.No. _____

Home Address _____ Bus. Tel. No _____

Name _____ Home Tel. No. _____

Home Address _____ Bus. Tel. No. _____

MEDICAL HISTORY: Does your child have any allergies or other conditions?

Yes ___ No ___ Specify _____

His your child under medication?

Yes _____ No _____ I yes, provide detailed list, including name, dosage and timing of medication.

Is your child/family receiving PROFESSIONAL help? Yes ___ No ___ (remedial ___ clinical ___)

Name: _____ Tel. No. _____

FAMILY DOCTOR/CLINIC:

Name _____ Tel. No. _____

**CHILD'S MEDICARE NO. _____ Expiry Date _____

We hereby certify that all information given is true and correct and agree to all the provisions. This Agreement is drawn up in English through the mutual consent of both parties.

***** **Signature:** Parent or Legal Guardian _____

Relationship to Camper _____

CAMP AGREEMENT

- A. Camp reserves the right to refuse any application.
- B. That all fees are paid prior to the dates outlined on page 1.
- C. **REFUND POLICY:** If a camper is sent home for violation of camp policies during camp (smoking, drugs, alcohol, or inappropriate behaviour) then **NO** refund will be issued. Refunds might be given for health reasons only.
- D. All campers must submit a completed medical form authorizing his participation to the camp, including detailed physical restrictions and particularities. **This medical form must be handed by July 2nd 2007.** Failure to hand in a medical form will result in your child being denied permission to attend camp.
- F. ***CAMP DOES NOT ASSUME ANY RESPONSIBILITY FOR LOSS OR DAMAGE TO BAGGAGE OR PERSONAL BELONGINGS OR MONEY, DURING PERIOD AT CAMP. (We suggest labeling all belongings)***
- G. **AUTHORIZATION FOR MEDICAL CARE FOR CAMP B'NAI BRITH**
In case of illness or accident affecting my child, and I/we are not available to furnish my consent, I hereby authorize you to engage such medical personnel and/or institutions as you may deem necessary and further authorize such medical personnel or institutions to perform those medical procedures surgical or otherwise, which in their opinion are necessary for the proper treatment of my child.

PLEASE NOTE: Failure to report any and all information regarding medical and/or emotional, behavioral problems may result in your children being asked to leave camp and **NO** refund will be issued.
- H. No food products to be brought to camp and/or either dropped off at camp office (city/up north).

PLEASE INDICATE YOUR UNDERSTANDING AND ACCEPTANCE OF THE RULES AND COMMITMENTS BY SIGNING IN THE SPACE BELOW:

Camper's name: _____

****Signature of Parent /Legal Guardian**_____

In case of emergency and parents and/or legal guardian are not available, Camp B'nai Brith is authorized to release my child to: Name_____Address_____Phone#_____ ***Signature: Parent or Legal Guardian _____
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In order for us to issue a tax receipt for the 2005 camping season, it is IMPERATIVE that we have the social insurance number (S.I.N.) of the parent who will be claiming the child care expense. NAME OF PARENT_____
SOCIAL INSURANCE #_____

CAMP B'NAI BRITH
CAMPER RULES AND EXPECTATIONS - 2007

ALL CAMPERS MUST READ THESE CAMPER RULES AND EXPECTATIONS. BOTH THE CAMPER AND THE PARENT/GUARDIAN **MUST SIGN** AND RETURN THIS AGREEMENT IN ORDER FOR YOUR REGISTRATION TO BE PROCESSED.

Camp B'nai Brith is a most unique place. Located in the glorious Laurentians, we have the opportunity to appreciate the beauty and serenity of the natural surroundings. We also interact closely with one another in a social environment.

The success of Camp B'nai Brith (the "Camp") depends in a large part upon the commitment and participation of every camper. With that in mind, it is understood that the undersigned (the "Camper") has chosen to be an active and integral participant in the building of our special camp community. In order to best attain this goal, the Camp has determined that all campers and their Parent(s) must agree to comply with the following camp rules and expectations.

In order to ensure that the camper will derive the greatest benefit from the Camper's experience and to help ensure the safety, security and well being of all participants, the camper and the Parent(s) Guardian(s) of the camper hereby acknowledge and agree to the following. Please read our rules carefully **BEFORE** you decide to become a camper and/or family of C.B.B.

CURFEW: Chances are that the camp day is different from your schedule at home. Each tier of the camp has a curfew, at which time all campers within that tier **MUST** be back in their cabins. On special occasions, a curfew may be changed by the Director. **Once campers return to their campers for the night, they may not leave the cabin without express permission of a counsellor or administrator.**

VISITS TO OTHER CABINS: Every camper has a right to privacy. To protect this right, the camp requires that living quarters be limited to those who reside in the cabin. **At no time may boys and girls visit each other's living quarters.** You will have ample time to visit and socialize with your friends, but only in designated areas. As well, the camper will respect all areas of the Camp which are considered off limits and will not leave the campgrounds unless it is part of the program and the Camper is under staff supervision.

LIVING IN THE CAMP COMMUNITY: We require that campers share responsibility for keeping common areas of camp clean, and for making sure that camp equipment and property, as well as personal property, is appropriately treated and cared for. **Vandalism and defacement of camp property, including graffiti, will not be tolerated. Please note that you will be charged for any damage done to camp property by your camper.** It is also expected that campers respect other campers and staff members, and that behaviour that violates this principle, (fighting, improper language, stealing etc.) is against camp rules.

PARTICIPATION IN CAMP ACTIVITIES : The Camper understands that all aspects of the Camp's program are mandatory and agrees to be a positive and active participant in all of the Camp's programs.

COMMUNICATION DEVICES/ELECTRONICS: The Camper will not use or be in possession of a cellular telephone, pager, or any other communication device during the Camp session. The Camper will not use or be in possession of a television, mini fridge or any other electronic appliance during the Camp session.

FIRE HAZARDS: The Camper will not light matches, lighters, firecrackers, burn mosquito coils and/or operate a hot pot or kettle.

Infringement of rules listed above will be cause for parent notification, and may result in dismissal as well.

The Camper understands that the Camp reserves the right to check all personal belongings of the camper upon arrival at camp and that the Camp further reserves the right to do random checks throughout the camping season.

SMOKING: *Under no circumstances are campers permitted to smoke at camp.* Aside from being injurious to your health, smoking puts camp property and the health of others at risk. ***Lighters, torches, matches, or any other incendiary devices are also strictly prohibited at camp. Failure to abide by this rule will result in the camper being sent home.***

ALCOHOL: *Alcoholic beverages of any sort cannot be brought possessed, shared, or consumed by any camper at the camp. Failure to abide by this rule will result in the camper being sent home.*

DRUGS: *Absolutely no drugs, including marijuana, will be tolerated at camp. Failure to abide by this rule will result in the camper being sent home and the camper may be subject to prosecution if drugs are found in his/her possession.*

A single infringement of any of the above **italicized rules**, at any point during your stay at camp, **WILL** result in a camper being sent home immediately.

PLEASE NOTE THAT THERE IS NO REFUND, UNDER ANY CIRCUMSTANCES, FOR A CAMPER WHO IS SENT HOME FOR VIOLATION OF CAMP RULES.

CAMPER'S NAME (PLEASE PRINT): _____ Date: _____

SIGNATURE OF CAMPER

SIGNATURE OF PARENT/GUARDIAN