

David Thompson Bible Camp On-Site Summer Registration Form 2025

Camper Name: _____ New Returning Sex: Male Female

Birthday: (dd)____ (mm) ____ (yr) ____ Age (during camp): ____ Cabin Partner: _____

Address: _____ Town: _____ Prov: ____ Postal Code: _____

Father (First/Last Name): _____ Mother (First/Last Name): _____

Child Lives with: Both Father Mother Grandparents Fostercare Other _____

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

Work Phone: (____) _____ - _____ Email (Required): _____

Emergency Contact Name: _____ Relationship: _____

Emergency Contact: (____) _____ - _____ T-Shirt Size: _____ (YS, YM, YL, AS, AM, AL, AXL)

CAMP SELECTION (Please check the camp of your choice)			
Classic Camps (all ages as of 12/31/of current year)			
Camp Week	Dates	Ages	Price
<input type="checkbox"/> Pathfinder Teen <input type="checkbox"/> **Horsemanship	July 6-11	13-17	\$220 \$242
<input type="checkbox"/> Adventure Intermediate <input type="checkbox"/> **Horsemanship (age 10+)	July 13-18	8-12	\$220 \$242
<input type="checkbox"/> Prospector Junior <input type="checkbox"/> **Horsemanship	July 20-25	10-12	\$220 \$242
<input type="checkbox"/> Trailblazer Senior Teen	August 2-5	15-18	\$110
<input type="checkbox"/> Explorers Childrens	August 18-23	8-10	\$220
Specialty Camps			
<input type="checkbox"/> Discovery Day	August 6-8	6-9	\$110
<input type="checkbox"/> Go Girls	August 10-15	8-13	\$220
<input type="checkbox"/> Boys Wilderness (off-site)	August 10-15	13-16	\$247.50
Development Program			
<input type="checkbox"/> LIT (Leaders in Training) - application is part of online registration	June 30-July 4	15-17	\$120
<input type="checkbox"/> BOLD Workcrew- application is part of online registration	July 20-25, 28-30	13-16	\$165

CAMP POLICIES

REGISTRATION TIMES - Registration for Summer Camps (Teen, Junior Girls, Intermediate, Girls Only) are Sunday 4- 5 p.m. PLEASE DO NOT COME EARLY - the staff needs the early afternoon to prepare the grounds; DTBC will NOT be responsible for your child before the stated registration times.

CLOSING PROGRAMS - Sign out for all Summer Camps is Friday at 7 p.m. We invite you to join your child during our final chapel at 6 p.m.

SPECIALTY CAMP TIMES - DAY CAMP - Day 1 - Registration is at 8:30 a.m. Sign out at 7 p.m. Day 2 - Registration is at 8:30 a.m. Pick-up is 7 p.m. Day 3 - join us for the Parents Program at 6 p.m.

CAMPER SIGN OUT POLICIES - In order to keep DTBC a safe place for your child, campers must be signed out of the camp office before leaving the grounds.

LOST & FOUND - Please label belongings to help limit lost & found. Please call as soon as possible if you have lost belongings.

MEDICATIONS - All medications (over the counter medication and prescription medication), vitamins, etc. must be handed in to the camp First Aider upon arrival. Only the camp First Aider or delegate can administer medication. Medication MUST be in their original containers or dispenser.

TUCK - Each camper is permitted to spend up to \$2 on tuck per day (included in registration – Classic Weeks and Girls). All money MUST be turned in to the office. Healthy options are available.

STORE - The DTBC store sells camp T-Shirts. and may be available during registration and after the closing program.

ATTENDANCE - A camper may register for more than one week of camp. If a wait list occurs, they will receive a lesser priority if they have already attended a camp this summer.

PAYMENT - Cash, cheques, money orders, e-transfers, or credit/debit (credit/debit handled online only and not onsite.) Cheques can be made payable to DTBC and can be mailed to BOX 2455, Fairview AB T0H 1L0. Please do not postdate cheques. E-transfers can be sent to office@dtbc.ca.

DEPOSIT - A \$50 deposit must accompany all registrations.

CANCELLATION POLICY - When a cancellation is made two weeks prior to a camp session, the fee, aside from the deposit, will be refunded. There will be no refund if the cancellation is made less than two weeks prior to the start of the registration camp session, unless in the case of a medical emergency.

I understand and agree that pictures may be taken during camp. These pictures may be used by David Thompson Bible Camp for promotions. Yes No **(must check one)**

Would you like to receive emails about upcoming camp and partner events? (You may unsubscribe at any time)

Yes No **(must check one)**

I hereby give permission for this camper to attend this camp. **I have read and agreed with the policies and conditions in this document.**

Signature: _____ **Date:** _____
(Parent/Guardian if under eighteen)

PAYMENT

Reg fee: \$ _____

+ Donation: \$ _____

- _____ Discount: \$ _____

= Total Enclosed: \$ _____

(non-refundable \$50 deposit must be enclosed)

Medical Information

Health Care # _____ Province _____

Special Conditions: (please make us aware)

Asthma Bedwetting ADHD Physical Restriction

Diabetes Homesickness Epilepsy Other

Particulars: _____

Other Special Health Concerns (include diet): _____

Medication: _____

Reason, frequency, and duration: _____

Allergies: Yes No (explain) _____

For mild conditions, DTBC offers over the counter medications such as: Tylenol (acetaminophen), Advil (ibuprofen), cough drops, cough syrup, Benadryl (or other anti-histamines), Dimetapp, Gravol, and Imodium. Please list any of these or other common medications that you **do not** wish to be administered to your child:

DISCOUNTS PLEASE NOTE: In addition to the early bird discount, you may receive only **one** other discount if applicable.
EARLY BIRD - Claim a \$25.00 discount per registrant. Retreats are excluded. To qualify FULL payment must be made by April 30th.
FAMILY RATE - Deduct \$25.00 per camper for the third and each additional child registered (immediate family only). Registrations must be mailed together.
BRING A NEW FRIEND – Bring a friend who has never attended and you and your friend can receive a \$25.00 discount. Restrictions may apply. Both registrations should include this discount.
VOLUNTEER DISCOUNT – Volunteers receive a 50% discount for one person. This discount is available for yourself (i.e JR or SR Summer Missions Team), children, or grandchildren, and must be prior to or during their camp week. Each volunteer qualifies for one discounted week of camp per camp season.
FINANCIAL AID – Financial aid may be available upon request, please contact the camp office for details.

**Informed Consent and Assumption of Risk
 READ BEFORE SIGNING**

Participant’s Name: _____ DOB: _____
 (please print)

IN CONSIDERATION of being permitted to participate in any way at David Thompson 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 personal 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 the ministry point 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 the ministry point liable for any such injury.**
4. Furthermore, I agree to obey all ministry point rules and take full responsibility for my behaviour in addition to any damage I may cause to the facilities utilized by the ministry point.

I have read this *Informed Consent and Assumption of Risk Agreement*, fully understand its terms and the risks I am assuming by signing it, and sign it freely and voluntarily.

Participant Signature (13 years and older) Date Phone #

(Address, City, Province, Postal Code)

FOR PARTICIPANTS OF MINORITY AGE

(under age 18 at time of registration)

This is to certify that I, as parent/guardian with legal responsibility for this participant, have read this *Informed Consent and Assumption of Risk Agreement*, fully understand its terms, and that I have given up substantial rights by signing it, and sign it freely and voluntarily.

Parent/Guardian’s Signature Date Phone #

To view One Hope Canada’s Privacy Policy, please visit: <https://onehopecanada.ca/privacypolicy/>