

CAMP HARDING 2016
Camp Registration Form
Anglican Diocese of Qu'Appelle at Cypress Hills
Provincial Park



Camper Information

Name: _____ Surname: _____

Date of Birth: _____ Age [at time of camp]: _____

Gender: Male Female

Address: _____

Allergies (Food, Plants, Medications): _____

Camp Attending

Teens Adventure Camp (14-17) – July 3 - July 9 (Sunday-Saturday)

Intermediate Camp (10-13) – July 10 – 15 (Sunday-Friday)

Juniors Camp (6-9) – July 20 – 24 (Wednesday-Sunday)

Transport (check box if you need help or would like to help.)

Yes, you may share my name and email for carpooling.

Parent/Guardian Information

Name of Parent or Guardian: _____

Phone Number(s) Home _____ Work _____

Contact Email: _____

Signature _____ Date _____

Please mail/email this form with \$100 deposit (payable to Camp Harding, refundable up to 14 days prior to camp) and health release to: Julie Moser: Julie.moser@sasktel.net 1501 College Ave., Regina SK, S4P 1B8.