



St. Volodymyr Ukrainian Catholic Eparchial Camp

Camp Application - Please read carefully and fully fill out the form then send it to the address provided below (5 pages).

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Youth Camp Ages 8 – 13 (July 13 – 21, 2024) \$350

Participant's Information:

Participant's Name					
Birthdate		Age		Gender	
Ukrainian Language	<input type="checkbox"/> None	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Fluent	Comments:
T-Shirt Size	<input type="checkbox"/> Youth Small	<input type="checkbox"/> Youth Medium	<input type="checkbox"/> Adult Small	<input type="checkbox"/> Adult Medium	<input type="checkbox"/> Adult Large <input type="checkbox"/> Adult XLarge

Parent/Guardian's Information:

Full Name of Participants Parents or Legal Guardian					
Address					
City/Province		Postal Code			
Parents Phone Number	Home		Cell		
Parent's E-mail Address					
Other Adults Authorized to pick up your child					

Medical Information:

Our camp has a well-equipped first-aid station, staff trained in first aid, as well as a nurse on call and only 20 minutes away from the nearest hospital. Safety is a priority! You will be responsible to pay for any medications purchased for your child during camp. (Example: Benadryl or antibiotics). **A more in depth medical consent form will need to be filled out for every camper upon arrival at camp**			
Health Card Number			
Family Doctor		Doctor's Phone Number	
Medical Information (Will you be taking any medication at camp? Allergies? Other Info?)			
Dietary Information (Vegetarian? Vegan? Lactose Intolerant? Other info?)			

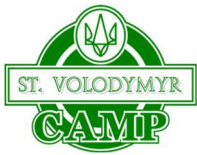
Emergency Contacts & Information (In case you cannot be reached):

Primary Emergency Contact Name		Phone Number	
Secondary Emergency Contact Name		Phone Number	



Send Forms and Cheque to:
327 Sumner Lane
Saskatoon S7L 7L9

www.stvolodymyrcamp.com
stvolodymyrcamp@gmail.com



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Payment Information:

Camp Fee **\$350.00**

Cheques or money order payable to "St. Volodymyr Eparchial Camp", which can be post-dated to May 31, 2024

Payment can be made by etransfer to stvolodymyrcamp@gmail.com but registration forms need to be mailed in asap.

Please mail cheque or money order with this form. Camp Fees must be included with the application form.

Camp Registration
c/o Elaine Koshman
327 Sumner Lane
Saskatoon, SK
S7L 7L9

Cancelation Fee: In case of unforeseen circumstances that your child will not attend camp there will be a \$25 fee that is non-refundable.

Camp Bunny Hugs:

This year we are again offering Camp Bunny hugs for Sale. The bunny hugs will be **Pink** with a St. Volodymyr camp logo. The cost will be **\$65 each**.

If you are interested, please mark what size below and provide a separate cheque for this amount payable to "St. Volodymyr Eparchial Camp". They will be available on the first day of camp. Bunny hugs can be purchased for family members as well as campers.

Bunny Hug Size	<input type="checkbox"/> Youth Small	<input type="checkbox"/> Youth Medium	<input type="checkbox"/> Adult Small	<input type="checkbox"/> Adult Medium	<input type="checkbox"/> Adult Large	<input type="checkbox"/> Adult XLarge
Total Quantity:	__ Youth Small	__ Youth Medium	__ Adult Small	__ Adult Medium	__ Adult Large	__ Adult XLarge

NOTE: Bunny hugs are Pre-Order only.

"Make new friends but keep the old" Cabin Assignments:

Please specify if there are any children you want your child to bunk with during camp. We will accommodate each child bunking with at least one person on their list. In order for children to practice their social skills and meet new friends your child may have to sleep in a different cabin than some of their best friends. This is one of many ways camp encourages new friendships.

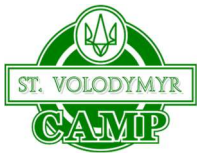
I would like my child to share a cabin with:

How did you hear about St. Volodymyr camp?



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Permission to Swim:

I give my child permission to participate in swimming and other water activities. My child's swimming ability:

Swimming Ability (Please Check One)	None	Basic	Good Swimmer
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Permission to Attend Excursion:

St Volodymyr Campers may participate in an excursion by chartered bus. During the excursion they will participate in different activities.

Legal Release & Responsibility to Pay for Damage:

I understand that the purpose of St. Volodymyr Ukrainian Catholic Eparchial Camp is to provide an opportunity for youth to experience God through nature and companionship of others. I understand that my child will have the opportunity to experience Ukrainian language and culture during the camp along with games, religious activities, hikes, sports, arts and crafts, camp fires, water activities and other common summer camp activities.

I agree not to make a claim or file a lawsuit against St Volodymyr Ukrainian Catholic Eparchial Camp if my child is injured while participating in this Program, *unless there has been gross negligence on the part of St Volodymyr Ukrainian Catholic Eparchial Camp.*

My child and I understand that camp participants are expected to conduct themselves in accordance with local laws and camp rules. If my child engages in inappropriate behaviour he / she *may* be sent home before the end of the Program at the camp director's discretion. I agree to collect my child from camp, at any time at the camp director's discretion, and to cover costs associated with such trip. I also agree to pay for any damage or injury caused by my child.

Permission to use Images, and Art or Written Work:

I agree that St Volodymyr Ukrainian Catholic Eparchial Camp may use and publish photographs, written work or video created as part of participation in this Camp Program for use in the production of promotional materials including web pages and Facebook Pages. These items may be used and published with the participant's first name. Unless my specific parental consent is obtained, participants will not be identified by full name.

Signatures:

As proof of:

- Permitting my child to participate in the camp;
- Authorizing St Volodymyr Camp personnel to provide consent for medical treatment
- Permission to use Images, and Art or Written Work
- Permission for my child to swim
- Permission to attend excursion
- Permission to receive emails from St. Volodymyr Eparchial Camp

I have signed this document on the date stated agreeing to all above conditions in exchange for my child to participate at St. Volodymyr camp.

Signature of both Parents or Legal Guardians	Date signed:



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Donations:

In order to keep camp fees low, please consider signing up to donate food items that are needed for camp at <https://www.stvolodymyrcamp.com> Thank you

Agenda:

Saturday July 13th

10:00am - Camp Registration

- **NO breakfast will be provided to campers**

Sunday July 21st

1:00pm - Divine Liturgy

- **You and your family are welcome to join us**

2:15pm -Praznyk

- **Lunch will be served for a minimal cost**
- **Campers receive a free lunch**

3:00pm - Camper's will host a short program showcasing what they learnt at camp

3:30pm - Camp ends

Note: Campers are expected to stay until the end



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Ukrainian Catholic Eparchy of Saskatoon Parental Consent Form

Parish/Organization	
Event/Activity	St. Volodymyr Ukrainian Catholic Eparchial Camp

I/we grant permission for _____(name) to participate in the above event/activity and take responsibility for arranging for transportation to and from the event/activity.

In signing below, I/we hereby acknowledge that sufficient information has been provided by the event coordinators with respect to the planned activities, duration, location, method of transportation, sleeping arrangements, participants and supervision. I understand that I am welcome to attend or drop in at any time during the event/activity.

I/we understand that parents/guardians of all children and youth are responsible for transportation to and from events, unless shared transportation details have been provided. Youth with licenses will drive themselves/others only with my/our approval. No employee or volunteer working within or on behalf of the Eparchy of Saskatoon will ever ask or give consent for a youth with a driver's license to drive another child or youth.

I/we have provided medications and give consent for them to be dispensed at the request/need of my/our child.

In the event that I/we are unavailable, I/we do hereby give consent for all emergency medical care (including surgery, if deemed necessary and recommended by at least two attending physicians) prescribed by a duly licensed physician for my child in the event of injury or illness during the above-named event/activity. This emergency medical care may be given under whatever conditions are deemed necessary, so as to preserve and protect life, limb, health and well-being of my child.

I/we assume all risks and hazards incidental or in any way related to my child's participation in the above named event/activity, and in each phase of it.

_____	_____	_____
Name of Parent/Guardian (Printed)	Signature of Parent/Guardian	Date

If a second signature is required by a joint-custody or other legal agreement, please fill out below:

_____	_____	_____
Name of Parent/Guardian (Printed) (day/month/year)	Signature of Parent/Guardian	Date

Covenant of Care Abuse and misconduct Protocol Eparchy of Saskatoon - October 1, 2017

Available online at:

<http://www.skeparchy.org/wordpress/about-us/policies-and-procedures/eparchlal-covenant-of-care-abuse-and-misconduct-policy/>

**** Please return pages 1 - 5 with camp registration****



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