



Registration Form

Lead Week (Gr. 9-12): Aug. 5th-10th, **Jr. High (Gr. 7-8):** Aug. 11th-16th

Elementary (Gr. 4-6): Aug. 18th-21st

Name of Camper:

Age: **Grade:** **Camp:** Choose one

Home Address:

P.O. Box or Street Address:

Town/ City: Postal Code:

Home Number: Email Address:

Emergency Contact 1

Full Name:

Mobile Number: Relation to Camper:

Emergency Contact 2

Full Name:

Mobile Number: Relation to Camper:

Health

T-shirt size for camper:

Allergies: Yes No

If Yes, Please Specify:

Other Health Conditions:

Health Card Number:

Register online at archgm.ca/csm2024

Contact **Ester Qualizza** at **780-532-9766** or e-mail finassistant.agm@outlook.com if you have further questions about payment and registration.

Consent

I consent on behalf of the registered individual named above, to give the Archdiocese of Grouard McLennan, its representatives, and employees the right to take photographs or video footage of the registered individual and their property in connection with any Camp St. Martin Sponsored activity.

I understand and consent that the pictures and video footage maybe used for promotional and publication the same in print or electronically.

I Consent:

I Do not Consent

E-Signature or Initials

Camp St. Martin has permission to secure emergency transportation for my child in the event of an illness or injury which requires emergency treatment. The emergency transportation service will determine the facility to which my child will be transported.

I Consent:

I Do not Consent

E-Signature or Initials



Is there any thing else the team should know about your child?

(Examples: Sleeping habits, first time away from home, etc?) Yes

No

If Yes, please specify:

Payments:

Made by: **Cheque**

Credit

E-Transfer

Note: **Deadline** of Payments will be **on or before** July 31, 2023, Monday

A. For Cheque Payments:

Note: Please make cheques payable, with a **CSM Memo** to Archdiocese of Grouard-McLennan.

Drop off and Mailing Address: Chancery Office, 10301 102 St, Grand Prairie, AB T8V 2W2

B. For Credit Payments:

Click this link: <https://www.archgm.ca/donations/> and fill up the items accordingly.

C. For E-Transfer

Recipient: etransfer.agm@outlook.com

Reminders: Please note in the message section, the Name of the Camper, Camp that he/she will join.