



CAMP GEDDIE 2026

Summer Camp Registration Form

Mail to: Camp Geddie PO Box 34, New Glasgow, NS, B2H 5E1
Email: director@campgeddie.ca

Camper's Name: _____

Cabin Selection: Male Spectrum Cabin / Female Spectrum Cabin/ Gender Inclusive Cabin (**circle and label 1st and 2nd choice**) - SEE OUR WEBSITE FOR MORE INFORMATION ON CABIN OPTIONS

Birthdate (dd/mm/yyyy): _____

Grade in school ('25 - '26): _____

Camp Session Registering for: _____

Camper's T-shirt Size: Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large Adult X-Large

Mailing Address: _____

Email Address: _____

Parent/Guardian's name: _____

Home Phone: _____ **Work Phone:** _____

Emergency Contact: _____ **Phone:** _____

Health Concerns: _____

A detailed health form will be sent to you to complete and bring to camp when you drop off your camper. It is helpful for us to be aware of any diet/allergy/chronic conditions beforehand so that we are prepared for your camper's stay with us.

Has your camper been to Camp Geddie before: Yes / No **If yes, how many years:** _____

Church Affiliation (Name of church and denomination): _____

Siblings Registered for Camp: _____

We offer a sibling discount for families sending multiple children to camp. (\$20 off for the second child, \$30 off for the third child)

Cabin Mate Request: _____

Each camper may request one cabin mate. If both campers request one another the request is guaranteed. All other requests will be considered but are not guaranteed.

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Method of Payment: Credit Cheque Cash e-Transfer

For payment by credit card, please enter your payment information below:

Visa Mastercard

Card Number: _____ Expiry Date: _____ CVV: _____

Name of Cardholder: _____

Please make all cheques payable to: Camp Geddie **Mail to:** Camp Geddie, PO Box 34 New Glasgow, NS B2H 5E1

e-Transfer to: admin@campgeddie.ca

PARENT/GUARDIAN PARTICIPANT RELEASE: By signing below you acknowledge that:

1. Payment in full is due on opening day of your camper's camp session.
2. Refunds of total fees paid less the \$75 deposit will only be made for those who cancel more than one week before their camp session, with a medical reason.
3. Although every effort is made to send campers home with all of their belongings, Camp Geddie is not responsible for any loss or damage.
4. Your child will follow all reasonable instructions from the staff of Camp Geddie while participating in the program.
5. Camp Geddie reserves the right to cancel a child's participation in a camp session if their behaviour is deemed unmanageable or dangerous to themselves or others, in which case they will be sent home immediately.
6. You release Camp Geddie, its staff and volunteers of and from all manner of actions, claim and demands of whatever nature which result from any loss, injury or expense sustained, arising out of or in any way connected with participation in any program or attendance at a location operated by Camp Geddie.
7. In the event your child is injured, ill or in need of medical attention and you are unable to be contacted, you authorize Camp Geddie staff to seek medical attention on your behalf.
8. You authorize Camp Geddie to use any photographs taken of your child while participating in Camp Geddie programs for future promotional materials.
9. While Camp Geddie is committed to confidentiality and all of your information is handled with great care we do release stats and must show select materials to the CANSPEI for accreditation purposes however the forms and information is not kept by CANSPEI, only reviewed in person.

Parent/Guardian Signature: _____ **Date:** _____