



SUMMER CAMP PARTICIPATION FORM

NAME:	SEX: (Please Circle) Male Female
BIRTHDATE: (MM/DD/YY)	TELEPHONE: ()
ADDRESS:	CELL PHONE: ()
CITY:	POSTAL CODE:
() STATUS () NON-STATUS () METIS () INUIT () FIRST NATIONS () OTHER:	E-MAIL:
PHOTO RELEASE CONSENT: (Please Circle) YES/ NO	

PRIMARY EMERGENCY CONTACT INFORMATION:

NAME:	RELATIONSHIP:
ADDRESS:	CITY:
DAY TELEPHONE: ()	EVENING TELEPHONE: ()

ADDITIONAL INFORMATION:

ALLERGIES/ SENSITIVITIES:	
DOCTOR:	TELEPHONE: ()
MEDICATIONS:	HEALTH CARD:
DO YOU SMOKE?:	IF SO, HOW MUCH?:

PLEASE INDICATE PREFERRED WEEK/(DAYS) OF CAMP HERE :

<input type="checkbox"/> JULY 2 – 5, 2019, 2019 AGES 6-9 DAY CAMP	<input type="checkbox"/> JULY 14-20, 2019 AGES 13-15 OVERNIGHT CAMP
<input type="checkbox"/> JULY 29-AUGUST 2, 2019 AGES 10-12 DAY CAMP	<input type="checkbox"/> AUGUST 4-10, 2019 AGES 13-15 OVERNIGHT CAMP
<input type="checkbox"/> JULY 7-13, 2019 AGES 10-12 OVERNIGHT CAMP	<input type="checkbox"/> AUGUST 12-16, 2019 AGES 16-18 OVERNIGHT CAMP

PARENT NAME: (Please Print)	DATE:
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PARENT SIGNATURE:



ENAAHTIG CODE OF CONDUCT

The Code of Conduct of Enaahtig Healing Lodge is a set of standards that all people at the Lodge, both staff and participants are expected to govern their behaviour by. The code is established to promote an atmosphere of spiritual, emotional, mental and physical safety. We believe this is necessary for the healing and health of each of us and for the integrity of Enaahtig Healing Lodge. The following guidelines are Central to our Code of Conduct.

1. All persons at Enaahtig are expected to exhibit respect for others in their behaviour, manner and speech. Accordingly, emotional abuse (e.g. insults, hurtful criticism, or verbal intimidation), physical violence or intimidation will not be tolerated at any time.
2. All persons at Enaahtig are expected to exhibit respectful relations with all of creation while at the lodge. Accordingly, all persons must not hurt or damage plants, animal life or otherwise do anything destructive to the land.
3. All persons at Enaahtig are expected to exhibit respect for all races of humankind and their original teachings in behaviour, manner and speech. Furthermore, we are expected to exhibit respect and non-interference with the beliefs and spiritual paths of others.
4. All person at Enaahtig are expected to exhibit respect for the property of the Lodge and the personal belongings of others. While at Enaahtig, the personal belongings of others are not to be used or interfered with without the permission of the owners.
5. Enaahtig is a drug and alcohol free area. Accordingly, no alcohol, drugs or non-prescription drugs are to be brought onto the property at any time.

TERMS AND CONDITIONS FOR PARTICIPATION IN THE ENAAHTIG SUMMER DAY CAMPS

6. Absolutely no use of drugs, alcohol or non-prescription drugs while participating in any Enaahtig Healing Lodge camps or programming
7. There will be zero tolerance for any violent or abusive behaviour including but not limited to bullying and harassment
8. All participants of the program and camps must abide by all safety rules and guidelines as outlined in the rules and regulations by the staff and participants
9. If at any time there is foul play suspected, all participants will be subject to a bag and room search to ensure the safety of other participants (if applicable)
10. While participating in any programs or camps youth are not to use any electronic devices. Any electronic devices found will be confiscated and returned to the participant at the end of the program.
11. **Electronic devices include but not limited to:**
 - Cell phones
 - Portable gaming devices, Ipods/Ipads, Tablets, laptops, MP3/4 players and any other devices
 - **I understand while participating in the programs and camps that I must refrain from any and all inappropriate sexual behaviour and activities.**

I, _____, have read, and understand the terms and conditions for my participation in any camps and programs; I also understand that failure to comply with the terms and conditions may result in withdrawal for the duration of the program. Parents/Guardians will be contacted to arrange for transportation.



PHOTO/VIDEO APPEARANCE RELEASE

I hereby grant to Enaahtig Healing Lodge & Learning Centre, including its employees, agents, contractors, successors, assigns and licensees, the full right of use, in whole or in part, as it sees fit, in all media, throughout the world, in perpetuity, and by any means at all, all results, products and proceeds of my appearances, interviews and services in connection with the final video production entitled “ Summer Camp Program (subject to name change)” and with the promotion or advertising of the production/ organization.

I agree that Enaahtig Healing Lodge & Learning Centre has the full right to edit, delete from, arrange, combine, revise or adapt in any manner whatsoever all or any part of any of the materials and to use the same in any manner which Enaahtig, in its sole discretion, deems appropriate. I further agree that Enaahtig Healing Lodge & Learning Centre is under no obligation to use all or any part of the materials in connection with or in the video/ slide show production.

I hereby release and discharge Enaahtig Healing Lodge & Learning Centre from any and all claims, demands, or causes of actions that I have or may in the future have for libel, defamation, invasion of privacy or right of publicity, infringement of copyright or trademark, or violation of any other right arising out of or relating to any utilization of the rights granted under this release.

Print Name: _____

Signature: _____

Parent/Guardian: _____

Date: _____



MEDICAL INFORMATION RELEASE

Physician: _____ Phone: (____) _____

Address: _____

Participant Name: _____

Participant Date of Birth: ____/____/____

Month Date Year

Physical Condition: (includes communicable diseases, diabetes, heart problems, etc.)

Medications: _____

Allergies: _____

Psychological Condition: (Medication if applicable)

Does the participant have a developmental disability or mental illness? _____ If yes, please describe:

Special care/diet indicated? _____

Please note that clients may be participating in Indigenous Ceremonies - Sweat/Teaching Lodges, etc. During the Sweat Lodge Ceremony, participants will be experiencing heat and humidity similar to a Swedish sauna for up to two hours. Any medical condition that you are aware of should be documented since it may affect their ability to participate in some ceremonies.

Have you ever participated in a sweat lodge ceremony before? _____

If yes, where was it conducted? _____

If no, is participant medically clear to participate in the Sweat Lodge? _____

Parent/Guardian Signature: _____

Date: ____/____/____

Month Date Year



Complete both section A and B for overnight camps

Complete only section B for day camps

Section A

Has the participant ever slept away from home? _____ For how long? _____ How often? _____

Who did they stay with? _____ Do they require a nightlight? _____

Any bed wetting issues? Or other sleep issues? _____

Do they currently share a room? _____ If yes, with who? _____

Do they have a morning routine? Bedtime routine? (ei. Alarm clock to wake up or wake up call, shower, ect)

Section B

What is the participants experience with horses: _____

Any riding lessons: _____ If so, Western or English? _____

Are they comfortable with most animals? _____ Cats? _____ Dogs? _____

Comments: (any other items you would like to inform us of)
