

TEMAGAMI

***Canoe Trips***

***In the Canadian Wilderness***

***For Boys and Girls***

**Lake Temagami**

**Ontario, Canada**

**2020 Application**

**June 27 – August 11**

THREE AND SIX WEEK SESSIONS

INCLUDING FULL SUMMER EXPEDITIONS

**Boy’s Programs Girl’s Programs**

Manitou Songadeewin

Ages 10-13 Ages 10-13

Waubeno/Algonquin Winisk

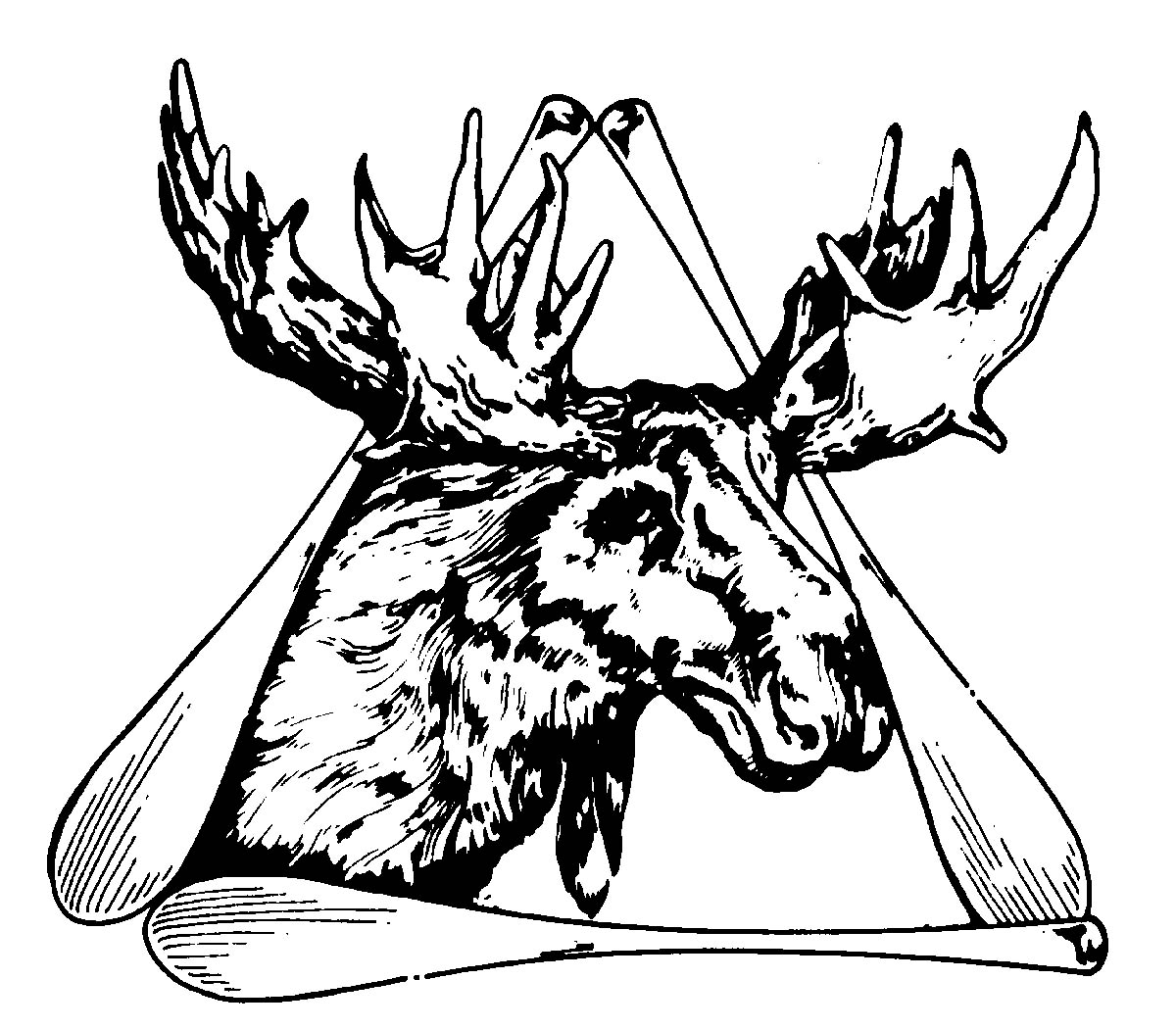
Ages 13-15 Ages 13-15

Outpost Outpost

Ages 14-16 Ages 14-16

Temagami Temagami

Ages 16-18 Ages 16-18

Accredited by the Ontario Keewaydin Temagami is owned

Camping Association and operated by the Keewaydin Foundation, a Vermont non-profit corporation

**Winter Address** *(September to May)*  **Summer Address** *(June to August)*

Keewaydin Temagami Keewaydin Camp

500 Rustic Lane General Delivery

Salisbury VT 05769 USA Temagami ON P0H 2H0

Tel (802) 352-4709 Canada

Fax (802) 352-4772

[www.keewaydin.org](http://www.keewaydin.org)

**2020 Application Information**

**Sessions Fees Dates**

Sections A or 1\* $8,860+ June 20-August 11

Sections B, D, 2 and 3\* $8,350++ June 27-August 11

Outpost Boys and Girls\* $8,350+++ June 27-August 11

Six-week Base Camp Session $7,250 June 27-August 11

Three-week Base Camp Session $4,950 June 27-July 19 or July 20-August 11

\* Expedition trips generally require previous Keewaydin experience.

+ There is an additional $1,650 transportation fee for this trip.

++ There is an additional $1,050 transportation fee for these trips.

+++ There is an additional $1,000 transportation fee for these trips.

**A non-refundable deposit of $500 is required with application.**

(Deposits will be refunded only if we are unable to accept a camper).

**Discounts**

Early Bird Enrollment – $250 discount if application is received by November 1, 2019.

Sibling Discount – 5% discount on each fee is given for two or more siblings attending any

Keewaydin Foundation Camp (Temagami, Dunmore, Songadeewin).

**Taxes**

HST tax of 13% will be added for all fees and purchases.

**Other Charges**

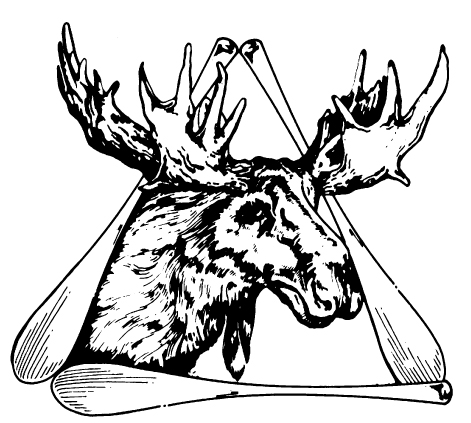
Camp Store – usually up to $200 for a first year camper.

Chartered Bus - $125 each way, both from and to Toronto Airport.

**Please Note**

This application is made and accepted in accordance with the provisions of the Keewaydin Temagami brochure, the Keewaydin website and this application. **A non-refundable $500 deposit is due at the time of this application. (Deposits will be refunded only if we are unable to accept a camper.) Payment must be received by March 1, 2020. No refunds will be given after this date.** Priority will be given to returning 2019 campers if their application is received before November 1, 2019. Priority will also be given to campers enrolling for the six-week session, if space is available. No refund is given for any camper arriving late or leaving early. The right is reserved to dismiss a camper at any time if deemed in the best interest of the camp or the camper. **Application is not valid unless Parent or Guardian has signed the Parent Agreement on the back of the application.**

*Please retain this page for your records.*



Return to:

Keewaydin Temagami

500 Rustic Lane

Salisbury, VT 05769

**APPLICATION FOR ENROLLMENT – 2020 SEASON**

**PLEASE INDICATE DESIRED PLACEMENT**

**Expedition Trips: \* Dates and Rates Below Three-Week Base Camp Session: June 27 – July 19 ($4,950)**

❑ Section A (boys) *(June 20-Aug 11)* $8,860+ ❑ Manitou 1 (10-13- year-old boys)  
 ❑ Section 1 (girls) *(June 20-Aug 11)* $8860+ ❑ Songadeewin 1 (10-13- year-old girls)

❑ Section 2 (girls) *(June 27-Aug 11)* $8,350+

❑ Section 3 (girls) *(June 27-Aug 11)* $8,350+

❑ Section B (boys) *(June 27-Aug 11)* $8,350+ T**hree-Week Base Camp Session: July 20 - August 11 ($4,950)**

❑ Section D (boys) *(June 27-Aug 11)* $8,350+ ❑ Manitou 2 (10-13- year- old boys)

❑ Outpost (boys) *(June 27-Aug 11)* $8,350+ ❑ Songadeewin 2 (10-13- year- old girls)

❑ Outpost (girls) *(June 27-Aug 11)* $8,350+

***DISCOUNTS*** Early Bird Enrollment **- $250 fee discount if application is received**

**Six -Week Base Camp Session: June 27 - Aug 11 ($7,250) before** **November 1, 2019.**

❑ Waubeno andAlgonquin *(13-15-year-old boys)* Sibling Discount - 5% discount on each fee is given for two or more

❑ Manitou *(10-13-year-old boys)*  siblings attending any Keewaydin Camp (Temagami, Songadeewin or Dunmore)

❑ Winisk *(13-15-year-old girls)*

❑ Songadeewin (*10-13-year-old girls)* ***TAXES***

13% Canadian HST tax will be added to your bill

*\* Generally reserved for experienced Keewaydin campers* *+Plus applicable transportation fees*

I wish to enroll \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

(*full name) (name we should call camper)*

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date of Birth \_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_ Age (on July 1, 2020) \_\_\_\_\_\_\_\_\_\_\_\_\_ years \_\_\_\_\_\_\_\_\_\_\_\_\_\_ months

*month day year*

Height \_\_\_\_\_\_\_\_\_\_Weight \_\_\_\_\_\_\_\_\_\_\_Eye Color \_\_\_\_\_\_\_\_\_\_\_ How well does your child swim\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present school \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade completed by June 2020\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous camp \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_How did you learn about Keewaydin? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Names and ages of siblings\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| Type of Information | Parent or Guardian 1  (should receive primary correspondence) | Parent or Guardian 2 |
| First and Last Name |  |  |
| Home Address |  |  |
| Home Phone |  |  |
| Work Phone |  |  |
| Cell Phone |  |  |
| Email |  |  |

**PLEASE READ AND SIGN THE PARENT OR GUARDIAN AGREEMENT ON THE REVERSE SIDE OF THIS APPLICATION**

**PARENT OR GUARDIAN AGREEMENT**

**This application is made and accepted in accordance with the provisions of the Keewaydin Temagami brochure,** **Keewaydin Temagami website and this application. A non-refundable $500 deposit is due at the time of this application. Payment in full must be received by March 1, 2020. No refunds will be given after this date. Priority for placement is given to returning campers if their application is received by November 1, 2019. Priority is also given to campers who apply for the 6-week session.**

**In order that Keewaydin may provide each camper maximum opportunity for his/her personal development, I understand that in signing this application I certify that I have read the Keewaydin Temagami brochure and understand that Keewaydin is a camp that leads challenging canoe trips. I confirm that my child is physically and emotionally prepared to fully participate in the programs that Keewaydin Temagami offers. I certify that my child is healthy and free of problems that could be deleterious to his/her happiness or that of other campers. I agree that in the event this application is accepted and a place is reserved for my child in a program, which he/she will remain in the program until the end of the period for which reservation has been made unless dismissed by the camp authorities for misconduct or for cause considered sufficient by the camp. In case of voluntary withdrawal or dismissal for cause herein provided, I understand that there will be no refund of program charges paid for the time reserved. No refund is made for campers arriving late or leaving early. The right is reserved to dismiss a camper at any time if deemed in the best interest of the camp or child.**

**I authorize the medical designees of the camp to administer health checks, routine care and any urgent or emergency treatment considered necessary. I desire that notification of such illness be sent to me by prompt means of communication. I understand that I am responsible for any bills related to hospital or doctor visits above or beyond basic first aid treatment.**

**It is my desire that my child be enrolled, as indicated on the front of the application, subject to the above conditions. I enclose the deposit and agree to pay his/her full tuition within the terms stated in the enrollment information. In signing this application I certify that my child is covered by health and accident insurance or Medicaid and I understand that I am obligated to provide the camp with the name of the carrier and policy number. By signing this registration I accept full responsibility for all incurred program fees and expenses.**

**Permission is granted to use, for publicity purposes only, any photographic or video images in which this camper appears.**

**I give permission for the Keewaydin Foundation and camps to communicate with me via electronic mail.**

**I understand that while Keewaydin is prepared to make reasonable accommodations for the inclusion of any individual camper, it is not prepared to make an accommodation that will place an undue burden on the camp or result in a substantial or fundamental alteration in its program or facilities.  Special circumstances as well as any requests for special accommodations must be brought to the attention of the Camp Director before the submission of this application.**

**Parent/Guardian Signature: Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please make checks payable to "Keewaydin".**  **Indicate any special billing instructions below.** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please Do Not Write Below This Line**

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