2024 Camp Columbus

2024



Waterton Lakes National Park

2024

All Camps Run for Five Days

CAMP FEES ARE \$300 PER CAMPER PER WEEK

CAMP 1	July 7 -12	BOYS AGE: 8 to 10 years
CAMP 2	July 14 -19	BOYS AGE: 9 to 11 years
CAMP 3	July 21 - 26	BOYS AGE: 12 to 14 years

CAMP 4	July 28 – Aug 2	GIRLS AGE:	8 to 10 years
CAMP 5	Aug 4 – 9	GIRLS AGE:	9 to 11 years
CAMP 6	Aug 11 - 16	GIRLS AGE:	10 to 12 years
CAMP 7	Aug 18 - 23	GIRLS AGE:	12 to 14 years



WWW.CAMPCOLUMBUS.COM info@campcolumbus.com

WHAT WE ARE ABOUT

Camp Columbus youth camp is owned and operated by the Knights of Columbus of Southern Alberta and is open to all boys and girls aged 8 to 14. The camp is in the beautiful Waterton National Park in Southern Alberta, Canada.

The camp program is one that emphasizes a Christian spirit, concern for our environment and cooperation with others. Our regular camps are limited to 48 campers and offer a high counselor to camper ratio. Campers are placed in groups of 12 with 2 counselors to each group.

The camp program for 8 and 9 year old's has been designed to accommodate their limited physical capabilities. We believe that our pre-camp planning, meetings, and counselor orientations make our camp program one of the best. We sincerely believe Camp Columbus will be an experience the campers will always remember.

ACTIVITIES IN THE CAMP PROGRAM INCLUDE: Campfires • Day Hikes • Swimming • Horseback Riding • Canoeing • Naturalist and Environmental Programs • Outdoor Sports • Arts and Crafts and much more.

CAMPERS SHOULD BRING THE FOLLOWING ITEMS TO CAMP:

Sleeping bag (all bunks have	Clothing for 5 days	Backpack if available	walking shoes/boots
mattresses provided)			
Swimsuit & towels	hygiene items	flashlight if desired	water shoes/sandals
Warm jacket	water bottle	Insect repellent	
Pillow			

Ensure that all belongings are marked with the owner's name

The Camp is not responsible for lost or damaged personal property.

- SPENDING MONEY IS NOT REQUIRED
- CAMPERS don't need: CELL-PHONES, IPODS, EAR BUDS, ELECTRONCIS, MUSIC PLAYERS, THESE ITEMS ARE NOT USEFUL IN OUR PROGRAM. These items may be collected by staff and put in storage to encourage children to participate in group programs. During hikes and some activities phones may be allowed for taking pictures.

TRAVEL & CHECK-IN INFO: Transportation to/from the camp is the responsibility of the parents or guardian. **NOTE:** Waterton Park Entrance fees <u>may be refundable</u> if leaving the park within 2 hours of entry. Please check with staff at the park entrance for details.

CHECK-IN: 2:00 PM - 3:00 PM on the Sunday. (no check-ins allowed before 2:00pm)

CHECK-OUT: 5:00 PM - 6:00 PM on the Friday. (early pickup must be prearranged with camp director)

IN CASE OF EMERGENCY, PHONE:

Lee 403-627-8108 Alex 403-328-4522 Pat 403-381-8599

GENERAL INFO:

A minimum of 25 campers are required before a camp will be held. Each 5-day camp will accommodate 48 campers. Apply Early! Camp cooks prepare meals & care for the kitchen. Campers may take turns doing dishes and minor housekeeping chores.

Note: Camp Columbus will comply with Alberta Government Health and Safety guidelines.

DIRECTIONS TO CAMP COLUMBUS:

After entering the Waterton Park Gates proceed towards the town site. After 5 kms take the first left hand turn AFTER crossing the Red Rock Canyon Creek Bridge; continue past the Horse Rental Stables for about 1 km. Watch for the Camp Columbus sign.

CAMPER REGISTRATION FORM Name: (Last)______(First)_ Birth date: (D) /(M) /(Y) AGE Camp # Preferred Alternate Camp#_____ Mailing address: City: Prov: Postal Code Prov: Postal Code Parent's/Guardian's Names: Address if different from above: ______Prov:_____Postal Code Mother's Address: Home Phone: _____ Work Phone: _____ Cell Phone: _____ Father's Address: _____ Prov: ____ Postal Code: _____ Home Phone: ______ Work Phone: _____ Cell Phone: _____ E-mail Address: (please write clearly) If Child will NOT be delivered or picked up by someone other than Parent/Guardian then specify below: ____Relationship to Child:_____ Name(s):____ Emergency contact number if parent is unavailable: Name: ______ Work Phone: _____ Alt/Cell Phone: _____ **HEALTH HISTORY** – Does your child suffer from any of the following? Convulsions_____Asthma_____Chronic Ear infections____Diabetes ____ Behavioral Disorders Physical Handicaps/Limitations_____ Other Serious Fears Provincial Health Care No. Province Phone ____ Family Doctor____ ALLERGIES Hay Fever_____Insect Bites (specify)_____Animals (specify)_____ Foods (specify) Drugs (specify) Other (specify) **Special Conditions associated with Child Camper** Special Diet Special Medications (please name) Activities to be restricted: Can child swim 25 meters Y/N Has child been exposed to any communicable diseases? Y/N Suggestions or comments :_____ ← Check this box if sending an **e-transfer** of funds. (See page 5 "Payment Information" for choices

CAMPER WAIVER FORM

ASSUMPTION OF RISK AND RELEASE OF CLAIMS (MUST BE SIGNED)

I AM AWARE AND ACKNOWLEDGE that the Southern Alberta Catholic Youth Camp Society camp activity program involves many inherent personal RISKS.

I UNDERSTAND that the various Camp activity programs require a minimum level of fitness and physical, mental, and emotional health (collectively "health"). I further understand that the probability of the Risks occurring depends in part on my child's level of fitness and health as well as on the awareness, care and skill with which my child conducts him or herself in the Camp.

I UNDERSTAND, AGREE AND ACKNOWLEDGE THAT by choosing to have my Child participate in the Camp and its activities brings with it the assumption by me and by my child, of the risks and I ASSUME FULL RESPONSIBILITY to instruct my child about the risks and the choices available to him and her relative to those risks. I understand and accept the above and provide the Southern Alberta Catholic Youth Camp Society with the following waiver of liability and indemnification agreement. Alcohol, Tobacco, Drugs and Unruly Behavior will not be tolerated.

property that I or my child may	, HEARBY REL and agents, from and against any p suffer, or for which I may be liable	LEASE The Southern Alberta present or future claim, loss of to any other person, during	Catholic Youth Camp Society or liability for injury to person or my child's participation at the
camp.			
XSignature	XWitness	X Date	
to engage in all prescribed subject to the rules and real I hereby give permission to treatment from, and to ord charges not covered by many claims against The Souther injury that may occur to the	TION AND CONSENT I is correct so far as I know, a d camp activities, except as regulations of the camp. In the to the physician selected by the der injection, anesthesia or say medical plan, i.e.: medicate ern Alberta Youth Camp Societe person named above, in consequence.	noted my me and agree e event I cannot be reach the Camp Director to hourgery for my child as notions, ambulance ride, etciety and its representations.	that the above will be hed in an EMERGENCY , spitalize, secure proper amed. I agree to pay any tc. I hereby waive all ves, for any accident or
attend has been made. Form completed by:		Relationsh	ip:
Signature:		D:	ate:

RELEASE AND INDEMNIFICATION AGREEMENT

PAYMENT INFORMATION:

CAMP FEE: \$300.00 (per camper per week) includes GST

PAYMENT OPTIONS

Option 1: E-transfer of camp fees - and both forms via e-mail.

Step 1: Email both forms (camper info & waiver) to REGISTRATION@CAMPCOLUMBUS.COM

Step 2: E-transfer the registration fee to CAMPCOLREG@GMAIL.COM

(e-transfers will auto deposit. No passwords needed) (you are "registered" if your e-transfer was successful)

Option 2: **Send a Check** and **both forms** in the post office mail.

CHEQUES PAYABLE TO: CAMP COLUMBUS

MAIL TO: Camp Columbus Registration

C/O Bob Rice P.O. Box 101

Waterton, AB. T0K 2M0

SUMMER EMPLOYMENT OPPORTUNITIES At Camp Columbus

POSITIONS AVALABLE:

- Directors
- Assistant Directors
- Counselors
- Cooks

WE ARE LOOKING FOR: Applicants who are enthusiastic and have a strong interest in camping, but above all, possess the love, understanding and patience that is essential when interacting with children. They should be mature individuals who are capable, caring, and efficient in directing children in a gentle but firm way; to ensure a safe and fun filled camping experience. Applicants should be willing and prepared to contribute in a positive and effective manner at pre-camp meetings and training sessions.

Age Requirements: Director must be 18 years old minimum.

Counsellors must be 16 years old minimum.

TO APPLY CONTACT:

Lee Hochstein 403-627-8108

E-mail: h.mariehelene@yahoo.ca

For general information contact info@campcolumbus.com

www.campcolumbus.com

http://www.facebook.com/campcolumbuskofc

APPLICATIONS FOR EMPLOYMENT must be received by April 30

CONTACT INFORMATION

PRESIDENT: Lee Hochstein (president@campcolumbus.com) 403-627-8108 cell

REGISTRATIONS: REGISTRATION@CAMPCOLUMBUS.COM

General information: INFO@CAMPCOLUMBUS.COM Rental Information: rentalinfo@campcolumbus.com

BLAIRMORE: Scott Morency 403-562-8439

Tony Vastenhout 403-562-2165

COALDALE: Joe Schwark 403-345-5066

Wayne Erdos 403-345-2948

LETHBRIDGE: Alec Misak (camp.col57@gmail.com) 403-328-4522 cell

Pat Johnston (patcjj@telus.net) 403-381-8599

Jim Wensveen 403-381-0970

FORT MACLEOD: Shane Doyle 403-553-2437

MILK RIVER: Bernard Miller 403-647-2234

PICTURE BUTTE: Lew Dooper (lewwil.dooper@gmail.com) 403-732-4962

PINCHER CREEK Morris Pittman (info@campcolumbus.com) 403-627-6417 cell

TABER: Jody Ginther (ginthers@Telus.net) 403 715 4680

WEBSITE: http://www.campcolumbus.com

Email info@campcolumbus.com

FACEBook Page www.facebook.com/campcolumbusKofC

