

CAMP COLUMBUS

(REGISTRATION FORMS ON PAGES 3 & 4)

2026



2026

WATERTON LAKES NATIONAL PARK

2026 FEES ARE \$385 PER CAMPER / WEEK

CAMP 1 July 5-10
CAMP 2 July 12-17
CAMP 3 July 19-24

BOYS AGE: 8 to 10 years
BOYS AGE: 9 to 11 years
BOYS AGE: 12 to 14 years

CAMP 4 July 26-31
CAMP 5 Aug 2-7
CAMP 6 Aug 9-14
CAMP 7 Aug 16-21

GIRLS AGE: 8 to 10 years
GIRLS AGE: 9 to 11 years
GIRLS AGE: 10 to 12 years
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 located within Waterton Lakes National Park, Alberta, Canada.

The camp program is one that emphasizes a Christian spirit, concern for our environment and co-operation with others. Our 5-day camps offer a high counselor to camper ratio. Campers are placed in groups of 12 with 2 counselors per group.

The camp program for 8 -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 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 Information sessions • Outdoor Sports • Arts and Crafts and much more.

CAMPERS SHOULD BRING THE FOLLOWING ITEMS TO CAMP:

Sleeping bag (all bunks have vinyl covered mattresses)	Clothing for 5 days	Backpack if available	walking shoes/boots
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 should not bring: PHONES or other electronics. 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.
- Special requests to have your child "share a cabin" with another friend can only be done at check-in.

TRAVEL & CHECK-IN INFO: Transportation to/from the camp is the responsibility of the parents or guardian.

NOTE: Waterton Park Entrance fees may be refundable if leaving the park shortly after entry. 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 or Morris 403-627-6417

GENERAL INFO: A minimum of 12 registered campers are required before a camp will be held. Each 5-day camp will accommodate 48 campers. Apply Early! Camp cook prepares meals & manages the kitchen. Campers may take turns doing dishes and minor housekeeping chores.

Note: Camp Columbus complies with Alberta Food, 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. Look for our Canadian flag at the camp buildings.

REGISTRATION FORM

Campers Name

(Last) _____ (First) _____ (Male) _____ (Female) _____

Birth date: (D) ____ / (M) ____ / (Y) ____ AGE ____ Camp # Preferred ____ Alternate Camp# ____

Mailing address: _____ City: _____ Prov: ____ Postal Code ____

Parent's/Guardian's Names: _____

Address if different from above:

Mother's Address: _____ City: _____ Prov: ____ Postal Code ____

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

Father's Address: _____ City: _____ Prov: ____ Postal Code: _____

Home Phone: _____ **Cell Phone:** _____

E-mail Address: _____ (please write clearly)

If child is delivered / picked up by other than Parent/Guardian then specify below:

Name(s): _____ Relationship to Child: _____

Emergency contact number if parent is unavailable:

Name: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

HEALTH HISTORY – Does your child suffer from any of the following?

Convulsions ____ Asthma ____ Chronic Ear infections ____ Diabetes ____

Behavioral Disorders _____

Physical Handicaps/Limitations _____

Serious Fears _____ Other _____

Provincial Health Care No. _____ **Province** _____

Family Doctor _____ **Phone** _____

ALLERGIES

Hay Fever _____ Insect Bites (specify) _____ Animals (specify) _____

Foods (specify) _____ Drugs (specify) _____

Other (specify) _____

Special Conditions

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 : _____

What payment method will you use?

(See page 5 "Payment Information" for choices)

← Check this box if sending a cheque in mail.

← Check this box if sending an **e-transfer** of funds.

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 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.

RELEASE AND INDEMNIFICATION AGREEMENT

I, _____, **HEARBY RELEASE** The Southern Alberta Catholic Youth Camp Society and their officers, employees and agents, from and against any present or future claim, loss or liability or injury to person or property that I or my child may suffer, or for which I may be liable to any other person, during my child's participation at the camp.

X _____ X _____ X _____
Signature Witness Date

PARENT'S AUTHORIZATION AND CONSENT

THIS HEALTH HISTORY is correct so far as I know, and the person herein described has permission to engage in all prescribed camp activities, except as noted my me and agree that the above will be subject to the rules and regulations of the camp. In the event I cannot be reached in an **EMERGENCY**, I hereby give permission to the physician selected by the Camp Director to hospitalize, secure proper treatment from, and to order injection, anesthesia or surgery for my child as named. I agree to pay any charges not covered by my medical plan, i.e.: medications, ambulance ride, etc. I hereby waive all claims against The Southern Alberta Youth Camp Society and its representatives, for any accident or injury that may occur to the person named above, in connection with the events for which application to attend has been made.

Form completed by: _____ Relationship: _____

Signature: _____ Date: _____

PAYMENT INFORMATION

CAMP FEE 2026 : \$385.00 (per camper per week) includes GST

- PAYMENT OPTIONS -

(Option 1) Electronic Transfer of money and forms.

Step 1: Email (**Registration & Waiver forms**) to: REGISTRATION@CAMPCOLUMBUS.COM

Step 2: E-transfer the funds to CAMPOLREG@GMAIL.COM

(e-transfers will auto deposit. No passwords needed)

(expect an email confirmation *once the funds & forms* have been received)

(Option 2) Post Office - Send a personal check and both forms in the mail.

MAIL TO: Registration / J Henderson
909 21 St S
Lethbridge Ab,
T1J 3L1

CHEQUES PAYABLE TO: CAMP COLUMBUS

SUMMER EMPLOYMENT OPPORTUNITIES

POSITIONS AVAILABLE: Directors, Assistant Directors, Counselors, Cooks

WE ARE LOOKING FOR: Applicants who are enthusiastic and have a strong interest in youth education, 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 17 years old by July 1st.

TO APPLY CONTACT: Lee Hochstein 403-627-8108 President@CampColumbus.com

General Information: info@campcolumbus.com

Website : www.campcolumbus.com

Facebook page: <http://www.facebook.com/campcolumbuskofc>

APPLICATIONS FOR EMPLOYMENT must be received by March 15

CONTACT INFORMATION

PRESIDENT: Lee PRESIDENT@campcolumbus.com 403-627-8108 cell/text

CAMPER REGISTRATIONS: REGISTRATION@campcolumbus.com

GENERAL INFORMATION: INFO@campcolumbus.com

GROUP RENTAL INFORMATION: RENTALINFO@campcolumbus.com

WEBSITE: <https://www.campcolumbus.com/>

Facebook www.facebook.com/campcolumbusKofC

