

REGISTER HERE

Name: _____

Birthday: _____ Grade: _____
(m/d/yr)

F M Age: _____

Home ph#: _____

Emergency ph#: _____

Mailing Address _____

Permission to place photos for
Facebook/Web page: Circle YES NO

Name of Parent(s) or Guardian (print)

Signature of parent or Guardian

(MUST BE SIGNED)



Please find payment enclosed \$ _____
Or I will pay on registration day _____

PLEASE MAKE CHEQUES OUT TO
**CEDARVIEW COMMUNITY
CHURCH**
Box 132
Port Clements, B.C.
VOT 1R0

To reserve a space call
250-559-4294



Dates: July 14-17 (Sun-Fri)

Age: 13-18

Cost: \$175 (before June 18)
\$200 (after June 18)

Location: Naikoon Park Fall Fair
grounds (Tlell)

Camp Schedule
Sunday, July 14 4pm
Gates open / registration
Friday, July 19 3PM
End of camp pick up

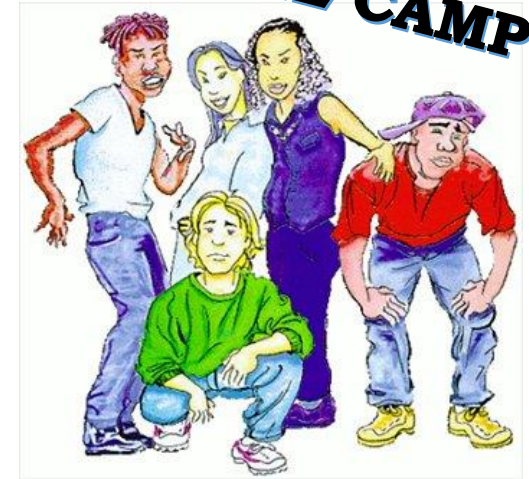
LIMITED SPACE AVAILABLE

Due to close living conditions a head lice check
will be done on REGISTRATION DAY for each
camper, before parents leave.

If any nits or lice are found registration will be
postponed until treatment is performed and
nits combed out.

Be sure to check for nits **2 weeks** prior to camp
beginning, we don't want to send anyone home.

MISTY ISLES BIBLE CAMP



July
14-19





- ___ day pack
 - ___ sleeping bag, sleeping mat, pillow
 - ___ 6 pairs of socks
 - ___ a modest swim suit
 - ___ old runners or water shoes
 - ___ extra pullover or jacket
 - ___ rain coat, rubber boots
 - ___ extra clothing
 - ___ underclothes
 - ___ hat
 - ___ 2 towels
 - ___ toothbrush / toothpaste
 - ___ comb or brush
 - ___ flashlight with name on it
 - ___ warm pajamas,(extra if needed)
 - ___ **BIBLE**
- (call 559-4294 if you need a Bible)



**ELECTRONICS
OR WEAPONS.**

Any concerns about camp, please call
Pastor Wes @ 559-4294

About Us

Misty Isles Bible Camp has been serving Haida Gwaii families for over 30 years. We are run entirely on volunteers – both local and from off island.

Highlights



MUSIC



Night Café



plus+more



PAINTBALL WARS

CONFIDENTIAL MEDICAL INFO

For the safety of your child please fill out the following information

BC Medical # _____

Doctor's name _____

Allergies: _____

Does your child suffer from any medical conditions YES NO

Explain _____

Name and dosage of any medication must be supplied to camp director upon arrival at camp.

ALL CAMPERS ARE EXPECTED TO WEAR LIFE JACKETS WHILE SWIMMING AND CANOEING.



There will be activities played during the camp that may involve bumping, running, jumping, ball throwing and will provide good exercise for your teen. If you are concerned about your teen doing any of the games please let us know.

I, _____ give permission for my teen to participate in Misty Isles Bible Camp activities.

Signature _____

Date: _____