



**Rotary Club of Peterborough Kawartha**  
**Adventure In Understanding – 2020 Canoe Experience Application Form**  
**August 30, 2020 – September 04, 2020**

**CAMPER INFORMATION: (print clearly)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_  
 Birthdate (yyyy/mm/dd): \_\_\_\_\_ Camper's Age on Aug 01/20 \_\_\_\_\_ Gender:  Male  Female  
 Do you self-identify as any of the following (optional):  White  Asian  Aboriginal  African American  
 Home Address: \_\_\_\_\_  
 City/Town: \_\_\_\_\_ Province/State: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Email Address #1: \_\_\_\_\_ Email Address #2: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Other: \_\_\_\_\_  
 Swimming Level:  NLS  Instructors  Bronze Cross  Bronze Medallion Expiry Date: \_\_\_\_\_  
 Camping/Out-Tripping Experience:  Tripping  Flatwater  Instructors  Other: \_\_\_\_\_  
 Canoeing Experience: \_\_\_\_\_  
 First Aid Training:  Emergency First Aid  Standard First Aid  CPR (Level C) & AED  Wilderness Advanced First Aid (WAFA)

**PARENTS/GUARDIANS & EMERGENCY CONTACTS: (print clearly)**

**Marital status of camper's parents/guardians:**

Single  Married  Separated  Widowed  Divorced  Other \_\_\_\_\_

**Legal Custody** (be sure to include their contact information below):

Both Parents (live together)  Joint Custody (live apart)  Mother  Father  Grandparents  Guardian  Foster Parents

**Emergency Contact:** Please list in order who should be contacted in case of emergency – be sure to include parents/guardians

1 <sup>st</sup> Contact: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr.	2 <sup>nd</sup> Contact: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr.
First & Last Name: _____	First & Last Name: _____
Relationship: _____	Relationship: _____
Home Phone: _____	Home Phone: _____
Work Phone: _____	Work Phone: _____
Cell Phone: _____	Cell Phone: _____
Other Phone: _____	Other Phone: _____
3 <sup>rd</sup> Contact: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr.	4 <sup>th</sup> Contact: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr.
First & Last Name: _____	First & Last Name: _____
Relationship: _____	Relationship: _____
Home Phone: _____	Home Phone: _____
Work Phone: _____	Work Phone: _____
Cell Phone: _____	Cell Phone: _____
Other Phone: _____	Other Phone: _____

Complete Page 2



**Rotary Club of Peterborough Kawartha**  
**Adventure In Understanding – 2020 Canoe Experience Application Form**  
**August 30, 2020 – September 04, 2020**

---

**Page 2 – Please complete fully**

**PAYMENT: (print clearly)**

**COST: \$360**

Cost includes all meals and equipment except sleeping bag, ground sheet or thermarest and personal belongings such as clothes, toiletries, etc.

- Cheque – made payable to the Rotary Club of Peterborough Kawartha  
 Credit Card – please complete information below

Credit Card Information:

Visa  Mastercard

Card Number: \_\_\_\_\_ Expiry Date: (MM) \_\_\_\_\_ (YY) \_\_\_\_\_

Card Holder: \_\_\_\_\_

---

**APPLICATION INFORMATION:**

Applications will be processed in the order they are received until a total of 20 youth have registered. Subsequent applicants may be placed on a “wait list” if requested.

**APPLICATION DUE DATE: June 1, 2020**

---

**SEND COMPLETED APPLICATION TO:**

Rotary Club of Peterborough Kawartha

c/o Don Watkins

645 Walkerfield Avenue

Peterborough, ON

K9J 4W1

Email: [adventureinunderstanding@gmail.com](mailto:adventureinunderstanding@gmail.com) (705)743-7693

---