

# CON-ED CARNIVAL CAMP 2011

**Dates:** September 24<sup>th</sup> and 25<sup>th</sup> 2011

**Departure:** JDUC (Union side) Saturday 9 AM SHARP!

**Return:** Sunday at 4 PM

**Cost:** \$70 per person, additional \$5 for Water Sports (tubing, waterskiing and wakeboarding), additional \$5 for Outdoor Adventure (zip-lining, high ropes and rock climbing)

\*Bursaries are available for this event. Applications can be found online at <http://queenscesa.com> or in the Office.

**Location:** Camp Kennebec (Arden, ON)

**NO REFUNDS**

**Included:** Transportation, Accommodation, Lunch and Dinner on the 24<sup>th</sup>,  
Brunch on the 25<sup>th</sup>, campfire snacks, Con-Ed Camp T-shirt

**Activities:** Non-traditional Carnival games, cheering, circle wrestling (a Con-Ed camp tradition!), campfire, soccer, archery, volleyball, tennis, canoeing, kayaking, swimming, water trampoline, basketball, baseball, floor ball, cycling, karaoke, movie night.

Deadline for Registration is **Wednesday September 14, 2011** (at 4pm).

Spaces are limited, so register now to reserve your spot!

Please submit the form below to the Con-Ed Office with your payment

OR

Email your information to **[8kh7@queensu.ca](mailto:8kh7@queensu.ca)** (Subject: Camp Registration) to reserve your spot, and mail payment to the Con-Ed Office (address below).

Please make any cheques payable to “Concurrent Education Students’ Association”

**Mailing Address**

**Con-Ed Camp  
Concurrent Education Students’ Association  
c/o Alma Mater Society  
John Deutsch University  
Queen’s University  
Kingston, ON K7L 3N6**

**Packing List**

- Sleeping Bag and Pillow
- Toiletries
- Flashlight
- Water Bottle
- Boots & Running Shoes
- Sunscreen
- Bug Spray
- Any Medications
- Swim Wear & Towel
- Warm Clothes
- Coveralls or clothing you don’t mind getting ripped or dirty!
- Money for food on the road (optional)

**PLEASE BRING YOUR HEALTH CARD!**

# CON-ED CAMP 2011

Please return the information below, with your payment attached, by **September 14** (4pm) at the latest.

## CONTACT INFORMATION

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Health Card Number: \_\_\_\_\_

Please circle one for each.

Payment: CASH CHEQUE    Activity (\$5 each): WATER    OUTDOOR

T-Shirt Size: S   M   L   XL   XXL

Dietary Restrictions: NONE    VEGETARIAN    VEGAN

DETAILS: \_\_\_\_\_

\_\_\_\_\_

Allergies: \_\_\_\_\_

\_\_\_\_\_

Any medical conditions or any medications you're bringing with you that we should be aware of:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## EMERGENCY CONTACT INFORMATION

Name(s): \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Location (city): \_\_\_\_\_