

## WELCOME TO SUMMER 2025 AT FISHING LAKE BIBLE CAMP!

Since 1945, FLBC has been on mission to bring the good news of Jesus to kids. Our staff are developing leaders who want to have fun, build friendships, and create amazing memories of summer camp through all kinds of experiences for campers.

**CANOEING \* ARCHERY \* PELLETRY \* CRAFTS \* TUBING \* KIDS & KITTENS \* BOATING \* SWIMMING \* WIDE GAMES \* CHAPEL \* FISHING \* OUTDOOR COOKING \* GAGA BALL \* 9-SQUARE \* ZIPLINE \* ... AND MORE!**

### THINGS TO KNOW...

- Drop-off is at 11am on the first day of camp. Families are invited to closing Chapel at 1:15 pm on the last day of camp, with pick up at 2pm following chapel.
- Please do not send your camper if they are sick. Contact the office if you are unsure what to do.
- Parents and guardians are asked not to visit throughout the week. Communication sent through the camp office through the week will be delivered.

### THINGS TO BRING...

**\*PLEASE LABEL ALL YOUR BELONGINGS\***

- Pillow & sleeping bag (or twin bedding) – mattresses are provided
- Extra blanket
- Personal toiletries (toothbrush/paste, shampoo, soap, deodorant, comb, towel)
- Bible (if available), pencil, notebook
- Sunscreen, hat, insect repellent
- Modest swimsuit and beach towel
- Rainwear, sweater or hoodie, long pants & light jacket
- Running shoes and sandals (strap-on sandals are preferable to flip flops)
- Water bottle labelled with your name

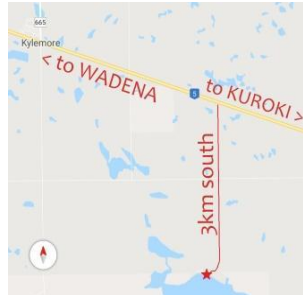
**\* Articles in the Lost & Found will be available for pick up by contacting the camp office. After September 1, 2025 unclaimed articles will be donated.**

### THINGS NOT TO BRING...

- Cell Phones, Multimedia & electronic devices
- Clothing that is revealing or has offensive language/graphics
- Weapons (incl. knives), tobacco, vaping pens/juice, alcohol, or non-prescription drugs
- Food/snacks from home – we will feed you well!

### CAMP MERCHANDISE

Go to our website [www.fishinglakebiblecamp.ca](http://www.fishinglakebiblecamp.ca) for the link to order FLBC merchandise! Your purchase supports local business. Choose your colour and size, and wear FLBC swag year-round.



### CONTACT

E-mail: [fishinglakebiblecamp@gmail.com](mailto:fishinglakebiblecamp@gmail.com)  
Send us a message through our [facebook](#) page.  
Our phone number is **306-338-2020**, but please be aware that it is a seasonal line.

### LOCATION

The camp is located approximately 16km east of Wadena, SK on Hwy #5; turn south at the Fishing Lake Bible Camp sign and go 3km to the camp entrance.

## 2025 CAMP SESSIONS

Early rates are fees paid in full prior to June 1, 2025

SELECT THE APPROPRIATE CAMP:

		(EARLY/LATE)
<input type="checkbox"/> Intermediate Camp (9-11yrs)	<b>July 7-11</b>	\$300 / \$320
<input type="checkbox"/> Jr. Teen Camp (11-13yrs)	<b>July 14-18</b>	\$300 / \$320
<input type="checkbox"/> Scamper Camp (completed Gr.1-9yrs)	<b>July 21-24</b>	\$250 / \$270
<input type="checkbox"/> Teen Camp (14-ent. Gr. 12)	<b>July 28-31</b>	\$300 / \$320

- No additional fees for canteen or skills in any camp.
- Family Rate: The first three children from the same family pay the full amount, each additional child is not charged.

**CAMPERSHIP:** Do you require financial assistance from the camp? Y \_\_\_ N \_\_\_

If yes, please submit a non-refundable \$50 fee with this form AND go to our website to obtain the form under "Camp With Us > Campership" to send in with your application. Contact the director if you have questions.

### CAMPER INFORMATION

TRY OUT OUR ONLINE REGISTRATION ON OUR WEBSITE!

Camper Name \_\_\_\_\_

- Male Date of Birth \_\_\_\_\_
- Female Age (at time of camp) \_\_\_\_\_ Going into Grade \_\_\_\_\_

Cabinmate Request (only 1, must be same gender) \_\_\_\_\_

Parent/Guardian Names \_\_\_\_\_

Home Ph. \_\_\_\_\_ Cell Ph. \_\_\_\_\_

Work Ph. \_\_\_\_\_ Alt Cell Ph. \_\_\_\_\_

Mailing address \_\_\_\_\_

City/Town, Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_

Parental Email \_\_\_\_\_

Once your application has been processed you will receive a confirmation email

### EMERGENCY CONTACT

(Will be contacted if parents or guardians cannot be reached)

Name \_\_\_\_\_ Relation to camper \_\_\_\_\_

Home Ph. \_\_\_\_\_ Cell Ph. \_\_\_\_\_

### PAYMENT INFORMATION

Make <b>cheques</b> payable to: Fishing Lake Bible Camp PO Box 835 WYNYARD, SK S0A 4T0	<b>NOTE the new etransfer email!</b> E-transfer fees to: <a href="mailto:fibcdonate@gmail.com">fibcdonate@gmail.com</a> Make the security answer "walleye"						
<b>Cancellation Policy:</b> We will issue a refund for campers that cannot come due to unexpected medical conditions (including head lice). All cancellations are subject to a \$25 handling fee.	<table border="1"> <tbody> <tr> <td>Camp Fees</td> <td>\$</td> </tr> <tr> <td>Donation (optional)</td> <td>\$</td> </tr> <tr> <td>Total</td> <td>\$</td> </tr> </tbody> </table>	Camp Fees	\$	Donation (optional)	\$	Total	\$
Camp Fees	\$						
Donation (optional)	\$						
Total	\$						

### OFFICE USE ONLY

Date Rec'd \_\_\_\_\_ PAID  \_\_\_\_\_

Notes \_\_\_\_\_ Amount \_\_\_\_\_

Cheque # \_\_\_\_\_

## MEDICAL INFORMATION

Camper Name \_\_\_\_\_

Provincial Health Number \_\_\_\_\_

Is the camper affected with any of the following?

- ADD/ADHD     Asthma     Bedwetting     Diabetes  
 Epilepsy     Fainting Spells     Headaches     Homesickness  
 Sleepwalking     Allergies (please list): \_\_\_\_\_

Any additional concerns (dietary or medical): \_\_\_\_\_

Is the camper allergic or sensitive to any drugs or medications?

No     Yes – If yes, please list: \_\_\_\_\_

Is the camper on medication?

No     Yes – If yes, please list: \_\_\_\_\_

## AUTHORIZATION FOR TREATMENT

1. I hereby authorize the camp personnel to handle any medical problems with my child during his/her stay at camp.
2. If the camper requires special medication, x-ray or treatment beyond that which is possible at camp, we will attempt to notify the parents as soon as possible. The parent/guardian will be responsible for any additional expenses for care or transportation. It is up to the discretion of the director and camp nurse to determine if the camper's illness requires them to be sent home.
3. I give permission for the following over-the-counter medications to be given:

- Appropriate Cold Formula     Antacid     Dimenhydrinate (Gravol)  
 Appropriate Allergy Formula     Acetaminophen (Tylenol)     Dimenhydramine (Benedryl)  
 Antidiarrheal Formula     Ibuprofen (Advil/Motrin)     Melatonin

## CONDITIONS OF ENROLMENT

1. The Camp Director reserves the right to dismiss any camper who, in the Director's opinion, is a hazard to the safety and rights of others, or who appears to have rejected the reasonable controls of camp and/or whose behaviour is placing unacceptable constraints upon the staff and their responsibilities toward other campers.
2. I, the parent/guardian of the camper, acknowledge and agree that all registrants enter and use the camp facilities and equipment, participate in camp activities and otherwise use, occupy and enjoy the camp grounds, waters and facilities at their own risk.
3. I, the parent/guardian of the camper, forever release Fishing Lake Bible Camp, its trustees, directors, staff and agents from any loss, personal or bodily injury, accident, actions and costs that may arise from participation, understanding that reasonable precautions shall be taken to ensure the health and safety of the camper.
4. I, the parent/guardian agree to permit videos and pictures of my camper to be used in the promotion of the camp.
5. I acknowledge that all non-emergency contact with campers is disruptive and will refrain from contact with my camper during their stay.
6. I acknowledge that FLBC is a religious organization and is governed by Biblical standards.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

# CELEBRATING 80 YEARS



Fishing Lake Bible Camp  
www.fishinglakebiblecamp.ca