



# ARROWHEAD CAMP

## WOMEN'S WEEKEND

Friday September 17 – Sunday September 19, 2010  
1111 Ronville Rd. RR.1 Dwight Ontario P0A 1H0  
Phone: 705-635-1600 Fax: 705-635-1630  
Website: [www.arrowhead.on.ca](http://www.arrowhead.on.ca)  
Email: [camp@arrowhead.on.ca](mailto:camp@arrowhead.on.ca)

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PARTICIPANT'S NAME: \_\_\_\_\_  
(First) (Last)

ADDITIONAL PARTICIPANTS' NAMES (in the same family at the same address)

ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_  
HOME PHONE: \_\_\_\_\_ BUSINESS PHONE: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_

EMERGENCY CONTACT FOR THE WEEKEND:

NAME: \_\_\_\_\_ CONTACT #: \_\_\_\_\_

INCIDENTALS:

Are there any health concerns that limit your full participation during the program? If so, please comment:

Special dietary requirements: Vegetarian Vegan Lactose Intolerant No Red Meat  
Other (please explain) \_\_\_\_\_

TRAVELLING GREEN:

Arrowhead Camp would be happy to assist with arranging carpools.

- I will be arriving by car       I will be arriving by car and have room for \_\_\_\_\_ people  
 I need a ride and would like to carpool

ACCOMMODATION PREFERENCES:

Accommodation is camper style cabins (upper and lower bunks) with washrooms in the cabins.

Any cabin mate requests? \_\_\_\_\_

Are you an early to bed person (by 10:30 pm)?

Are you a night hawk (after 10:30 pm)?

ACTIVITY PREFERENCES:

I am interested in attending the following workshops/classes:

- Jewelry/Beading       Yoga       Photography       Healthy Heart Fitness Class  
 Algonquin Park Hike       Lake of Bays Boat Tour       Drumming

## PAYMENT SUMMARY

Primary Participant	Additional Participants	Massage (optional)	Algonquin Park Hike (optional)
\$165	\$145 (in the same family at the same address)	\$45 for ½ hour \$60 for 45 minutes \$75 for 1 hour	\$10 (to cover cost of Park Permit and gas)
\$155 (2009 Participants)			

SUBTOTAL FEES \_\_\_\_\_

(Primary participant + Additional participants)

13% HST \_\_\_\_\_

MASSAGE (if desired) \_\_\_\_\_

ALGONQUIN PARK HIKE (if desired) \_\_\_\_\_

**TOTAL** \_\_\_\_\_

### PAYMENT METHOD

Cheque (payable to Arrowhead Camp)     
  Visa     
  Mastercard

Credit card number \_\_\_\_\_

Expiry Date \_\_\_\_\_

Name on the card \_\_\_\_\_

Signature of card holder \_\_\_\_\_

To complete the registration process, please send this form and payment by mail or by fax to the camp address found on the front of this registration form. You will receive a confirmation email or letter when we have received payment and have processed your application.

### REFUND POLICY

I understand that an administration fee of \$25 will be charged for any cancellation made; however, if there is a cancellation made within the 2 weeks preceding the Women's Weekend, I will not receive a refund, unless there is a documented medical reason.

### CONDITIONS OF ENROLLMENT

I agree to follow the policies and procedures set out by the Arrowhead Camp administration and staff. I understand that these policies include responsible drinking, and that I am responsible for my actions if I consume any alcohol on site. I also undertake to conduct my activities in a safe and careful manner.

I have read the Refund Policy and the Conditions of Enrollment and accept the terms as described for the Women's Weekend at Arrowhead Camp.

Signature: \_\_\_\_\_

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