

Pathfinder Family Camps 2024 Pathfinder Island, Source Lake

Choose A Family Camp / Complete and Return to Camp

July 6 - 9, 2024 Aug. 1 - 4, 2024

Parents' Names	First	Last	
Childrens' Names / Ages _			
Street Address			
City	State/Prov	Zip/P.C.	
Home Ph ()	Cell (mom)	Cell (dad)	
E-mail(s):			
Emerg. Contact		Phone()	
Parent Doctor		Phone()	
Children's Doctor		Phone()	
Children's School(s)			

2024 Family Camp Rates (all inclusive). Email or mail your complete form with cheque or Interac payment. No credit card payments.

Adults 19+: \$350.00 us / 450.00 cn per person.

Alumni & Camper Parents: \$250.00 us/cn per person.

Children 7-19 yrs.: \$170.00 us / 225.00 cn per person.

Children -7 yrs. & 2024 Enrolled Campers: No Charge.

*2024 – Details – Pets: No pets are permitted. Alcohol: Legal beverages are permitted at an adults cocktail hour before dinner, and a special beverage float or campfire during evenings. Please BYOB. Phones: A Pathfinder tradition, we ask that guests not use phones in common areas during Family Camp. Health: Please monitor family symptoms or exposures and rapid test before arrival to be sure. Thank you!

*2024 – Packing – Bring your comfortable play clothes, swimsuit and towel, trail footwear or sneaks (no bare feet, please), rain jacket, sweater or fleece layers, flashlights / battery lantern, and biodegradable toiletries. Camp beds are twin camp cots – bring bedding. Please bring your own life jackets for children under age-8. Feel free to bring favorite fish tackle, paddles, bikes-helmets, cameras, books, games.

What day and time do you expect to arrive at Source Lake? What day and time do you expect to depart Source Lake? Requests or Questions for Camp? (accommodation, facilities, meals, activities, gear)		
Please share any health c	onditions or dietary restrictions Camp should be aware of (i.e. diets, allergies, asthma)	
activities. I authorize the crequires medical attention that the camp activities and shall have exclusive jurisd hereby agree that if I common that	hfinder, its officers and employees, from all claims arising from our participation in family camp amp to secure medical treatment for someone in my party when appropriate. If for any reason someone beyond that furnished by the camp, I agree to be responsible for any expenses incurred. I acknowledge d any medical treatment will be performed in the Province of Ontario, and that the Courts of Ontario iction over any claims, legal dispute or cause of action arising out of my stay at Camp Pathfinder. I mence any legal proceedings, they will be held only in the Province of Ontario, and I hereby irrevocably isdiction of the Courts of Ontario.	
Today's Date:	Signed:	
Let us know of any activi	ities at Camp, or outings in Algonquin Park, your family especially wants to enjoy.	
Let us know of a family y	you would like to receive Camp Pathfinder information. Names/Address/Emails/Phones	
Family Camps 2024 Camp Pathfinder, est. 1914 Mike Sladden and Glenn An	rthurs – owners. Camp Director: mike@camppathfinder.com	
Summer:	Winter:	

Summer: Source Lake, Algonquin Park Huntsville ON P1H 2H1 Canada 705-633-5553 www.camppathfinder.com

Winter: 35 Park Lane Rochester, NY 14625 USA 585-249-0716