



**What day and time do you expect to arrive at Source Lake? What day and time do you expect to depart Source Lake?**

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**Requests or Questions for Camp? (accommodation, facilities, meals, activities, gear)**

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**Please share any health conditions or dietary restrictions Camp should be aware of (i.e. diets, allergies, asthma ...)**

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**We're Signing Up!**

I hereby release Camp Pathfinder, its officers and employees, from all claims arising from our participation in family camp activities. I authorize the camp to secure medical treatment for someone in my party when appropriate. If for any reason someone requires medical attention beyond that furnished by the camp, I agree to be responsible for any expenses incurred. I acknowledge that the camp activities and any medical treatment will be performed in the Province of Ontario, and that the Courts of Ontario shall have exclusive jurisdiction over any claims, legal dispute or cause of action arising out of my stay at Camp Pathfinder. I hereby agree that if I commence any legal proceedings, they will be held only in the Province of Ontario, and I hereby irrevocably submit to the exclusive jurisdiction of the Courts of Ontario.

Today's Date: \_\_\_\_\_ Signed: \_\_\_\_\_

**Let us know of any activities at Camp, or outings in Algonquin Park, your family especially wants to enjoy.**

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**Let us know of a family you would like to receive Camp Pathfinder information. Names/Address/Emails/Phones**

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**Family Camps 2024**  
**Camp Pathfinder, est. 1914**  
**Mike Sladden and Glenn Arthurs – owners. Camp Director: [mike@camppathfinder.com](mailto:mike@camppathfinder.com)**

**Summer:**  
**Source Lake, Algonquin Park**  
**Huntsville ON P1H 2H1 Canada**  
**705-633-5553**  
**[www.camppathfinder.com](http://www.camppathfinder.com)**

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