



**Alberta Whitewater Association**  
[www.albertawhitewater.ca](http://www.albertawhitewater.ca)



## Youth Camp August 20-24, 2008

With guest coach Billy Harris,  
thanks to funding from ASRPWF

**Objective:** To create an opportunity for young paddlers to participate in activities centered on river reading, river safety, basic slalom and freestyle kayaking in a fun and social atmosphere.

**Ability:** All levels are welcome to attend. The primary focus will be on those athletes new to paddling (novice/beginner) and those who have attended the Alberta Summer Games (intermediate).

**Location:** Red Deer River near Sundre, Alberta

### Tentative Program:

	Wednesday 20	Thursday 21	Friday 22	Saturday 23	Sunday 24
	Check-in at 9:30 am @ Carson Creek Campground				
AM	River Run	Skill Session	River Run	Skill Session	Skill Session
	Lunch	Lunch	Lunch	Lunch	Lunch
PM	Skill Session	River Run	Skill Session	River Run	Debrief and Pack-up
	Dinner	Dinner	Dinner	Dinner	
Evening	Dry-land activity: Safety Skills		Dry-land activity: Safety Skills		

**Skill Sessions:** The following activities will be available as skill sessions during the camp. These skill sessions will be allotted depending on participant numbers and demand. All participants must participate in each skill session during the camp. River runs will focus on application of skill sets.

1. Slalom skills: learn boat handling precision
2. Freestyle skills: enjoy waves, eddy lines, and holes (for those more adventurous!)
3. Safety skills: learn how to self rescue, tow a swimmer, use a throw bag, knife and whistle and identify potential hazards
4. River Reading Skills: learn to choose safe lines, scout rapids from your boat and the shore and identify river features

**Instructors:**

Head Instructor	Saskia van Mourik	AWA Technical Director
Visiting Instructor	Billy Harris	Canadian Freestyle Team, Jackson Team Member 2005 World Freestyle Championships Silver Medalist
Visiting Instructor	Carley Harris	Canadian Freestyle Team
Slalom Instructor	Connor Curson	Alberta Slalom Canoe Kayak Coach

**Directions:** See the map at [www.mukwah.com/map.html](http://www.mukwah.com/map.html) which shows the route from Sundre to Cold Camp Road.

- From the 4-way stop in Sundre, head west on highway 27 for approximately 10 km,
- Turn left on the Coal Camp Road (584 with signs to Mountain Aire Lodge and Ya Ha Tinda Guest Ranch).
- Drive 22 km along the Coal Camp Road and you will see Cartier Creek Campsite on the left side of the road.

**Camping:** Cartier Creek Campground (see directions above).

Payment is by drop box located in the campground.

Campsite has tent pads, some room for RV's, fire pits and outhouses.

No power, sewer, or electrical sites.

**Paddling Locations:** These sections of the Red Deer and Panther Rivers will be used:

1. Double ledge to Cold Camp Ledge
2. Mountain Aire Lodge to S Bend
3. S Bend to Ysachucks Crossing
4. Ysachuks Crossing to Cache Hill
5. Panther River to Mountain Aire Lodge

**Fee:** \$160 per person

- TAK members may attend free of charge as part of the Youth Leadership Diploma
- Slalom members may attend at a reduced fee of \$100.00
- As the camp is progressive, and each session builds upon the previous session's learning's, paddlers are strongly encouraged to attend the entire camp. For those with prior commitments, single days can be purchased for \$40 per day.
- **Parents** are welcome to join into the camp's paddling programs at the regular rate

**Included:** Outstanding instruction in a location that offers a variety of river features to challenge novice to intermediate level paddlers.

### **Logistics:**

- Parents are expected to:
  - supervise their children off the river,
  - participate in shuttle driving as needed,
- To add to the fun, families may wish to organize one or more “pot luck” meals. Spaghetti is always a camp favorite!

**Amenities:** Sundre is the nearest town and has amenities such as grocery store and gas stations.

### **Additional Costs:**

1. Camping is \$15.00 per night payable to the local camping authority (drop box on site)
2. ***Membership in AWA is required.*** Please join and support your local AWA Club. If no local Club exists, joining AWA directly is possible. If you are a member of an AWA Kayak Club your AWA membership is included or an Individual AWA membership is \$15.00. See: [www.albertawhiewater.ca](http://www.albertawhiewater.ca) for more info.

### **Pre-Registration:**

Please register by August 17<sup>th</sup> at 8:00 pm by emailing [althea@telusplanet.net](mailto:althea@telusplanet.net)  
***Payment will be accepted upon check-in.***

***Pre-registration is required for the complete camp and drop-in dates so that the appropriate number of instructors can be booked.***

**All participants are required to be members of the Alberta Whitewater Association and sign the attached waiver and medical forms prior to the camp.**

**Questions:** Please email any questions to [kayak.admin@gmail.com](mailto:kayak.admin@gmail.com)

**Medical Information** – *must be completed by all participants*

Course Name: \_\_\_\_\_ Dates: \_\_\_\_\_

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

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone (h): \_\_\_\_\_ (w) \_\_\_\_\_ (cell): \_\_\_\_\_

Health Plan Name & Number: \_\_\_\_\_

Other Medical Plan Name & Number: \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**In case of Emergency, Contact:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Telephone # (h) (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Telephone # (h) (\_\_\_\_) \_\_\_\_\_

**Medical History**

Do you have any known allergies or have you ever had a severe allergic reaction? If yes, please describe what causes the reaction, what happens when you have a reaction, and any medications you take or carry for the condition. Please include dosage, frequency and expiry date of medication. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any medical conditions (heart condition, high blood pressure, diabetes, chronic headaches, nosebleeds, asthma, emphysema, or other) any psychological and physical conditions (seizure disorders, depression, previous dislocations, breaks, recent surgery) that may affect your ability to participate in the program you have registered for. Please describe all past and present problems, how they affect you, the signs and symptoms of onset, and what triggers them. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you on any prescription or non-prescription medications? No \_\_\_\_\_ Yes \_\_\_\_\_

If yes, please specify name, dosage, frequency, and tell us why you are taking it.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you wear a Medic Alert? Yes \_\_\_\_\_ No \_\_\_\_\_ Details: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Date of last Tetanus Shot (they are valid for 10 years) \_\_\_\_\_

A valid tetanus shot is mandatory for all multi-day courses and trips.

General Physical Condition: good \_\_\_ fair \_\_\_ poor \_\_\_

Do you have any physical limitations? No \_\_\_ Yes \_\_\_ if yes please specify \_\_\_\_\_

Any shoulder problems? No \_\_\_\_\_ Yes \_\_\_\_\_ (Please describe): \_\_\_\_\_

Eye sight: (please check applicable) Good eyesight \_\_\_\_\_ Poor Eyesight \_\_\_\_\_

Wear Glasses \_\_\_\_\_ Wear Contacts \_\_\_\_\_ Comments \_\_\_\_\_

Please describe any dietary restrictions \_\_\_\_\_

In the case of the participant being under the age of eighteen (18) in the Province of Alberta, British Columbia, or under the age of responsibility elsewhere, I hereby give permission to a course/trip representative of Action Synergy Inc. and Paddle Performance to arrange any medical treatment required by my child or ward while she/he is under the care of the chaperone or guide during the program named above.

Parent/Legal Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Participant's Name: \_\_\_\_\_

**If you are bringing medication with you:**

- Bring twice as much as you are required to take the entire length of your program, and pack it in two water proof and UV proof containers.
- List your name, the name of the drug, and the dosage and frequency instructions on the outside of each container.
- Give one container to your instructor/guide in case you lose or damage your own.
- Make sure your medication has not expired

I have completed this medical form accurately and truthfully, and to the best of my knowledge. I understand that any injury or illness that is aggravated by, or as a result of my participation in this program and any evacuation costs arising thereof, is solely my responsibility and I therefore release Action Synergy Inc. and Paddle Performance, its directors, managers, employees, and associates from any future claim I might make against them. I understand that it is my responsibility to inform Action Synergy Inc. and Paddle Performance before my program starts, of any medical condition that may arise after filling out this form.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_.

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

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

**Alberta Whitewater Association**  
**WAIVER OF LIABILITY AGREEMENT**

**WARNING - BY SIGNING THIS FORM YOU GIVE UP IMPORTANT LEGAL RIGHTS! PLEASE READ CAREFULLY!**

NAME OF PARTICIPANT: \_\_\_\_\_  
ADDRESS OF PARTICIPANT: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DISCLAIMER CLAUSE**

The Alberta Whitewater Association, its member clubs, instructors, directors, agents, employees, volunteers and representatives (hereafter referred to as the "Association") and Her Majesty the Queen in Rights of the Province of Alberta are not responsible for any injury, loss or damage of any kind sustained by any person while participating in the Association's programs and activities for whitewater kayaking and canoeing, including injury, loss or damage which might be caused by the negligence of the Association.

**DESCRIPTION OF RISKS**

I acknowledge that I am aware of the possible RISKS, DANGERS AND HAZARDS associated with the water programs and activities for kayaking and canoeing either in a pool or outdoors in lakes, rivers or sea, including THE POSSIBLE RISK OF SEVERE OR FATAL INJURY TO MYSELF OR OTHERS. These risks include, but are not limited to:

- ◆ The risk of drowning including but not limited to, resulting from equipment entanglement, falling out of kayak/canoe into the water or being knocked unconscious in the water;
- ◆ Injuries resulting from your physical body hitting the kayak, pool surface or being hit by another paddler;
- ◆ Injuries resulting from abrasion from the pool surface
- ◆ On outdoor trips, extremes of weather or temperature which may result in hypothermia
- ◆ Hazards related to travel in and on lakes, rivers or seas
- ◆ Where applicable remoteness of location with poor communications and inability to get rescue or medical assistance quickly or easily
- ◆ Unfamiliar country where the participant may become lost, get off course or be separated from the rest of the party
- ◆ Medical problems arising before, during or after the trip
- ◆ Steep terrain where a fall or rock fall may cause injury or death
- ◆ Additional risks associated with travel to and from locations including transport by public or private motor vehicle, helicopter and light fixed-wing aircraft
- ◆ Failure to follow directions from instructors or those in charge of out door trips, including those specifying
  - a) staying with the group at all times unless the instructors or those in charge are consulted and provide consent;
  - b) where required and instructed to be wearing an approved personal flotation device completely fastened at all times on and around water;
  - c) safe use of tools and other equipment where required

**INDEMNIFICATION AND RELEASE OF LIABILITY**

In return for the Association allowing me to voluntarily participate in its programs and activities, I agree:

1. TO ASSUME AND ACCEPT ALL RISKS arising out of, associated with or related to my participation in the Association's programs and activities, even though such risks may have been caused by the negligence of the Association;
2. TO BE SOLELY RESPONSIBLE FOR ANY INJURY, LOSS OR DAMAGE which I may sustain while participating in the Association's programs and activities for kayaking and canoeing, even though such injury, loss or damage may have been caused by the negligence of the Association;
3. TO IDEMNIFY AND HOLD HARMLESS the Association, its officers, directors, agents, volunteers, employees and representatives from any and all claims, demands, actions and costs which might arise out of my participation in the Association's water programs and activities for kayaking and canoeing, even though such claims, demands, actions and costs may have been caused by the negligence of the Association.

**ACKNOWLEDGEMENT**

I UNDERSTAND THAT THIS IS A LEGAL AGREEMENT. It is binding upon myself as well as upon my heirs, next of kin, executors, administrators, assigns and representatives, in the event of my death or incapacity. I HAVE READ AND UNDERSTOOD ALL THE TERMS OF THIS AGREEMENT, and by signing this agreement voluntarily I am agreeing to abide by these terms.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_,

\_\_\_\_\_  
Signature of Participant (must be 18 or over)

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Signature of Parent (if under 18)

\_\_\_\_\_  
Printed Name of Witness

\_\_\_\_\_  
Printed Name of Parent (if under 18)