



**Rotary Club of Peterborough Kawartha**  
**Adventure In Understanding – 2026 Canoe Experience Application Form**  
**August 30, 2026 – September 04, 2026**

**CAMPER INFORMATION: (print clearly)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Birthdate (yyyy/mm/dd): \_\_\_\_\_ Camper's Age on Aug 01/26 \_\_\_\_\_ Pronoun \_\_\_\_\_

Do you self-identify as any of the following (optional):  White  Asian  Aboriginal  African American

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

City/Town: \_\_\_\_\_ Province/State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Camper Email \_\_\_\_\_

Address #1: \_\_\_\_\_ Email Address #2: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Other: \_\_\_\_\_

Swimming Level: NLS Instructors Bronze Cross Bronze Medallion Expiry Date: \_\_\_\_\_

Camping/Out-Tripping Experience: Tripping Flatwater Instructors Other: \_\_\_\_\_

Canoeing Experience: \_\_\_\_\_

First Aid Training: Emergency First Aid Standard First Aid CPR (Level C) & AED Wilderness Advanced First Aid (WAFA)

**PARENTS/GUARDIANS & EMERGENCY CONTACTS: (print clearly)**

**Marital status of camper's parents/guardians:**

Single  Married  Separated  Widowed  Divorced  Other \_\_\_\_\_

**Legal Custody** (be sure to include their contact information below):

Both Parents (live together) Joint Custody (live apart) Mother Father  Grandparents Guardian Foster Parents

**Emergency Contact:** Please list in order who should be contacted in case of emergency – be sure to include parents/guardians

1<sup>st</sup> Contact: Mr. Mrs. Ms. Miss Dr.

2<sup>nd</sup> Contact: Mr. Mrs. Ms. Miss Dr.

First & Last Name: \_\_\_\_\_

First & Last Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_

3<sup>rd</sup> Contact: Mr. Mrs. Ms. Miss Dr.

4<sup>th</sup> Contact: Mr. Mrs. Ms. Miss Dr.

First & Last Name: \_\_\_\_\_

First & Last Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_



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**Page 2 – Please complete fully**

**PAYMENT: (print clearly)**

**COST: \$450**

Cost includes all meals and equipment except sleeping bag, ground sheet or therm-a-rest and personal belongings such as clothes, toiletries, etc.

- Cheque – made payable to the Rotary Club of Peterborough Kawartha  
 eTransfer to [adventureinunderstanding@gmail.com](mailto:adventureinunderstanding@gmail.com)

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**APPLICATION INFORMATION:**

Applications will be processed in the order they are received until a total of 20 youth have registered. Subsequent applicants may be placed on a “wait list” if requested.

**APPLICATION DUE DATE: June 1, 2026**

**SEND COMPLETED APPLICATION TO:**

Rotary Club of Peterborough Kawartha  
c/o Don Watkins  
645 Walkerfield Avenue  
Peterborough, ON  
K9J 4W1  
Email: [adventureinunderstanding@gmail.com](mailto:adventureinunderstanding@gmail.com) (705)743-7693

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