

The 2025 Youth Hunting Camp will be taking place July 7-11, 2025 at the [HWWA building, 596 Bog Rd, Falmouth](#)
Registration opens at 9 AM on June 11, 2025. Full participation on Monday and Tuesday (Hunter Education and Canadian Firearms training) is mandatory so that youth can participate and be present during range/shooting sports activities.

Thank you for your interest in registering a participant(s) in the Youth Hunting Camp. Please read the following carefully and if you have any questions please do not hesitate to contact us 902-679-6091

- This camp is limited to 20 participants and is filled on a first come, first served basis. Participants must be between 12 - 15. (preference given to first time hunting camp applicants who have not completed Canadian Firearms or Hunter Education training).
- Parent/guardian must fill out the entire registration form (fillable .pdf) and email the form to huntersed@novascotia.ca
- Because of the high demand for space in this camp we ask guardians to please go over the camp program with their participant to ensure the camp and the child are a good fit. We want to ensure we have participants who are engaged and interested in learning about and experiencing hunting, fishing and outdoor skills.
- If you receive email confirmation that your application has been approved you have three (3) business days to pay, in person, at your local DNR office. To identify your local office please see our website at <https://novascotia.ca/natr/staffdir/offices.asp>
- There will be some indoor classroom time during the first two days to accommodate Hunter Education and Canadian Firearms training. We will make every attempt to make them as hands-on and fun as possible, however, participants should know the first two days are mandatory. This ensures each participant leaves certified to hunt with a HT certification and Wildlife Resources Card.
- We want to ensure our camp is inclusive and respects the needs of each unique participant. If your child has any special needs that we should consider in the delivery of the program please ensure that you let us know in the form below. This includes but is not limited to allergies, medical conditions, neurological or mental health disorders, learning adaptations, etc. If it is easier, please feel free to call our office at 902-679-6091 and we can discuss this in more detail.

1 - Personal information (participants must be between the ages of 12 – 15, **preference given to first time applicants who have not completed the Firearms/Hunter Ed training**).

Last name: _____

First name: _____ Middle name: _____

Date of birth (mm/dd/yyyy): _____ Gender: ☐ Male ☐ Female _____

Mailing address: _____

Postal Code: _____

Civic address (if different from above): _____

Name of Parent/Guardian (please print): _____

Phone number (Home): _____ Phone number (Work): _____

Phone number (Cell): _____ Email address: _____

Emergency Contact: _____ Phone Number: _____

T Shirt Size - Youth _____ T Shirt Size - Adult _____

Have you previously completed your Canadian Firearms Safety Course? Yes ☐ No ☐

Have you previously completed your Nova Scotia Hunter Education Course? Yes ☐ No ☐

Do you have your Wildlife Resources Card? Yes ☐ No ☐

Wildlife Resources Card Number (if camper has one): _____

Information required if no WRC number: Height _____ (Feet and inches) Eye colour _____

2 - Please list all allergies, daily medications, chronic health conditions, special dietary concerns.

If your child has a known anaphylactic allergy, please include an epi-pen and indicate to staff where it can be located

Name of family doctor: _____ Phone number: _____

In case of an emergency situation, your signature will indicate that we have permission to transport your child to a medical facility.
Your signature will also be your consent for any emergency medical treatment your child may require if you cannot be contacted.

Health Card Number: _____ Parent/Guardian Signature: _____

3 - Registration Confirmation and Cancellation Policy

Registration cannot be confirmed until the registration fee of \$200.00 and fully completed registration documents have been received. Payment must be received within three (3) business days. Cancellation of a participants registration and issuing a full/partial refund will be evaluated based on explanation provided (medical/family emergency etc.) and the timeframe before the camp begins. Without the minimum of 15 participants registered for the camp the camp will be canceled and registration fees will be reimbursed in full.

NOTE: Please do not send cash in the mail.

Registration Fee (\$200.00)

☐ Payment in person at DNR office \$108.00

☐ Payment to Safety Services \$92.00

Completed Registration Documents

Please send completed/signed registration forms to:

Email: huntersed@novascotia.ca

5 - Parent/Guardian Consent

By signing this document, I acknowledge having read the Camp Guidelines and Program Outline provided to me with this registration form, and I understand the physical requirements of the program for my child. I give consent to the participation of my child in the Hunting Camp for Youth on the terms and conditions contained in the Registration Form and in the Camp Guidelines and Program Outline.

Name (please print): _____

Signature: _____ Date: _____

APPENDIX 4

PARENTAL/GUARDIAN RELEASE OF LIABILITY AND WAIVER OF CLAIMS

(Please read carefully before accepting)

To be signed by parent/guardian for any minor (under 18 years of age) who is present at a DNR range.

In consideration for the minor being permitted to attend or use a Department Natural Resources approved shooting range, and as legal guardian for that minor, I agree as follows:

- 1. I am aware that the minor's attendance at, or use of, this shooting range is entirely at my own risk. I freely accept and fully assume all risks, dangers and hazards resulting from the minor participant's attendance and use of the shooting range.*
- 2. I acknowledge that I am voluntarily consenting to the minor's attendance and use of the shooting range and that, by doing so, I am voluntarily assuming all risks of injury or death or damage which the minor may suffer as a result of their attendance and/or use of the shooting range.*
- 3. I agree to release and hold harmless the Government of Nova Scotia, including the Nova Scotia Department of Natural Resources and the Department of Justice as well as their respective employees, contractors and agents from any and all liability for any loss, damage, injury and expense that the minor may suffer as a result of his/her use of the shooting range.*
- 4. I am aware of, and agree that I and/or the minor will follow the Rules associated with the appropriate use of the shooting range.*

I confirm that I have read and understood this Parental/Guardian Release of Liability and Waiver of Claims prior to accepting it. I understand that by signing/accepting this Release, I am acknowledging:

- 1. Consent for the minor to attend or participate and my own assumption of all risks of injury, death or property damage inherent in the minor attending or participating in shooting at a Natural Resources approved provincial range and that;*
- 2. I am waiving certain legal rights which I and/or the minor, their heirs, next of kin, executors, administrators, assigns and representatives may have against the Government of Nova Scotia and the Nova Scotia Department of Natural Resources.*

Minor #1 Participant's Name (Please print)

Parent/Guardian Signature

Date

Consent Form – Image Services



My name is _____

My address is _____

My phone number is _____

☐ This Consent Form is about photographs of me taken on (date) _____
at (event location) _____

☐ This Consent Form is about Photographs of my child/children, (names) _____

taken on (date) _____ at (event location) _____

I confirm that I am the parent or guardian of the child/children and that I have the authority to give consent on their behalf.

I consent to the photographs being used or published by the Province of Nova Scotia for public relations, promotions, commercial and advertising purposes.

I consent to the photographs being placed in the Office of Communication Nova Scotia's Visual Library. I understand that the Visual Library is a collection of photographs that can be accessed, used and published by any Department or Office of the Province of Nova Scotia.

I consent to the photographs being used or published on any number of occasions and in digital or printed form. Some examples of the ways that the photographs may be used or published are: on websites, on social media, in printed brochures and reports, in displays, in videos, in newspaper or magazine ads, television ads, and in presentation materials.

I understand that the Province of Nova Scotia will not be required to notify me prior to the use or publication of the Photographs.

I understand that the Province of Nova Scotia holds copyright in the photographs and may, in its sole discretion, provide permission to third parties to use or publish the photographs. I consent to the use or publication of the photographs by any third parties that have received this permission from the Province.

I understand that by signing this Consent Form, I am waiving any legal right I may have to the photographs. I understand that I will receive no payment or other compensation for the use or publication of the photographs.

I understand that the photographs may be stored in a location outside of Canada and accessed from outside of Canada (for example, photographs uploaded to a social media service or a government website). I consent to the photographs being stored outside of Canada and accessed from outside of Canada.

Signature: _____ Date: _____