

Wood Smoke and Paddle Song

Personal Information Sheet

Name (print) _____

Address _____ City _____ Postal Code _____

Phone: Day _____ Home _____

Email _____

Age _____

Emergency Contact:

Name _____

Address _____

Phone: Day _____ Home _____

Experience and Training/Certification:

Please indicate your experience and certification in the following areas:

(i) **Swimming** _____

If no current certification, are you able to swim 100 m? _____

(ii) **Canoeing Certification/level** _____

If no certification, please indicate: never paddled _____, bow paddled _____, stern paddled with control _____, solo paddled with control _____.

(iii) For Canoe Tripping courses- **Camping experience:** never camped _____, car/tent only _____, wilderness: less than 10 nights in total _____, more than 10 nights total _____.

(iv) For Canoe Tripping courses- **First Aid:** certification- _____ year awarded _____.

(v) Other related experience _____
