



# 11TH ANNUAL TRADES & TECHNOLOGY CAMP, May 3 & 4, 2012

Location: GPRC Fairview Campus



## ATTENTION STUDENTS GRADES 9 TO 12:

This is your opportunity to explore trades and technology training opportunities at GPRC. This may be the beginning of your career in one or more of over fifty Apprenticeship trades in Alberta.

Check with your school Counselor / RAP Coordinator for more information.

## RESPONSIBILITIES

### STUDENT:

- Must complete & submit application, signed waivers, choice selections and fee
- Must purchase own meals (Cafeteria on campus; Approximate costs, breakfast \$8.00; lunch \$10.00)  
**FREE BBQ ON THURSDAY EVENING**
- Must bring own sleeping bag, personal items (pillow, towels and indoor shoes) & swimwear
- Must wear protective clothing and footwear to all classes; bring coveralls, work gloves and closed toe shoes; Safety glasses will be provided

### SCHOOL:

- Promote the camp to students
- Provide transportation
- Provide chaperones (employees &/or parents must be actively involved in student supervision) at a ratio of 1 adult per 10 students; must be gender specific
- Organize credit for students

### GPRC – FAIRVIEW CAMPUS:

- Provide accommodations
- Provide hands-on classroom and shop instruction
- Provide space for evening activities
- Organize student information packages with CAREERS: The Next Generation
- GPRC campus tour

### CAREERS: THE NEXT GENERATION:

- Promote camp to school counselors
- Organize evening activities at Nottley Square
- Co-coordinate the daily events
- Organize consultants for counseling sessions

## SCHEDULE

### THURSDAY, MAY 3, 2012

Morning	School District organizes and transports students to GPRC - Fairview Campus
11:00-12:30 pm	Arrive at Campus; Residence Check-in; Camp Registration in AC144: Lunch (Cafeteria)
12:30-1:30 pm	GPRC - Campus Tour orientation (Meet in Room AC-144 for 12:30 pm start)
1:30-2:00 pm	Camp Welcome – All must attend - meet instructors (Theatre)
2:15-4:00 pm	<b>SESSION #1</b>
2:30-3:30 pm	Chaperones & Counselors' Meeting (Theatre)
4:15-5:00 pm	Introduction to RAP and GPRC Programs (Theatre)
5:00-6:00 pm	Free Barbecue (Cafeteria)
6:00-7:00 pm	CAREERS: The Next Generation Activity - TBA
7:00-9:30 pm	Evening Activities (hosted by GPRC Recreation Dept.) / Campus Tour
9:30-10:55 pm	More Evening Activities (Movie or Swimming)
11:00 pm	Retire for Night

### FRIDAY, MAY 4, 2012

7:30 am	Breakfast: Cafeteria
7:45 - 8:15 am	Camp Registration for "Friday only" groups (Theatre Foyer)
8:20 - 8:45 am	Theatre (meet instructors)
8:45-10:30 am	<b>SESSION #2</b>
9:00-11:00 am	Teachers, Supervisors Campus tour
10:45 am-12:30 pm	<b>SESSION #3</b>
12:15-12:30 pm	Evaluation (at end of 3rd session)
12:30-1:00 pm	Depart GPRC – Fairview Campus

## CONTACT

ROB WIEBE

CAREERS: The Next Generation

PH: 780.814.1692

E-MAIL: [rwiebe@nextgen.org](mailto:rwiebe@nextgen.org)

DIANNE LUND

GPRC, Event Planner

PH: 780.835.6682

E-MAIL: [dlund@gprc.ab.ca](mailto:dlund@gprc.ab.ca)

TOLL-FREE: 1.888.999.7882

FAX: 780.835.6670

GPRC Fairview Campus

PO Bag 3000

Fairview Alberta T0H 1L0



11TH ANNUAL

# TRADES & TECHNOLOGY CAMP, May 3 & 4, 2012

Location: GPRC Fairview Campus

## APPLICATION

(Please Print Clearly)

Student Name: \_\_\_\_\_

Male  Female  Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Residence Required? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Would you like a campus tour Thursday evening? Yes: \_\_\_\_\_ No: \_\_\_\_\_

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

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

Emergency Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of School: \_\_\_\_\_

School Contact: \_\_\_\_\_

School Phone: \_\_\_\_\_

\$15 Nonrefundable Registration Fee must be enclosed :

Visa  Mastercard  American Express

Card#: \_\_\_\_\_ Exp: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Cheques should be made payable to "GPRC" and mailed to: GPRC, Attn: Dianne Lund, P.O. Bag 3000, Fairview, AB T0H 1L0

**NOTE:** Registration is limited & sessions will be filled on a first come, first served basis when payment is received. Applications with choices and signed waivers must be faxed by the school to Dianne Lund at GPRC fax: 780.835.6670 by Friday, April 20<sup>th</sup>, 2012.

## SESSION CHOICES

Please select 4 choices and with an \* indicate which of the four you have the most interest in. All sessions are held Thursday and Friday, unless indicated otherwise.

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- Animal Health Technology
- Automotive Service
- Carpenter
- Cooperative Trades Orientation  
(Intro. to a multitude of trades)
- Electrician (FRIDAY ONLY)
- General Mechanic
- Harley-Davidson® Technician
- Heavy Equipment Service  
(Caterpillar/Finning diploma program)
- Heavy Equipment Technician  
(Apprenticeship)
- Instrument Technician
- Machinist / Millwright (FRIDAY ONLY)
- Motorcycle Mechanic
- Outdoor Power Equipment Technician  
(Small engines: Snowmobiles, ATV's, etc...)
- Parts Technician (FRIDAY ONLY)
- Plumber/Gasfitter-Steamfitter-Pipefitter
- Power Engineering
- Welder

## Participant Waiver Form

Participation in GPRC's Trades and Technology Camp (the "Camp") involves various hands-on activities, sports, games and physical activity which by their very nature, have the potential to cause damage or bodily injury. I hereby consent to the participation by \_\_\_\_\_ ("the Participant") in the Camp and I agree to and do hereby indemnify, save harmless and release the Grande Prairie Regional College, its officers, directors, governors, employees, agents representatives and insurers (collectively referred to as "GPRC") from any and all claims, actions, costs, expenses and demands of whatsoever kind, in respect to loss, damage, bodily injury or death to persons, including the Participant, or to property which may arise out of or in connection with the Participant's participation in the Camp, unless such loss is occasioned by or attributable solely to the gross negligence of GPRC.

I acknowledge that GPRC hereby reserves the right to request that the Participant withdraw from the Camp prior to its termination if, in the sole opinion of the Coordinators or the Instructors, the Participant is not acting in a responsible manner or displaying appropriate conduct or in the event that the Participant's behavior is deemed to constitute a danger to the health, safety or well being of other participants in the Camp. I further confirm that any medical condition or medication requirements of the Participant, of which I am aware, have been disclosed to GPRC herein.

Experience has shown that, in connection with Camp activities there are times when illness or accident may occur and immediate surgical or medical attention is necessary. This is my permission for the Camp counselors in charge, or designate, to make arrangements for qualified surgical or medical attention for my child/ward in the event of an emergency without necessity of my prior approval. I understand that I will be notified by the quickest means possible if this authority is exercised. I also consent to the transport by the Camp counselor in charge, or designate, to a medical facility, if medical treatment is required.

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

Camp Name & Date(s): \_\_\_\_\_

Name of Parent or Legal Guardian (please print): \_\_\_\_\_

Signature of Parent or Legal Guardian: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Alberta Health Care Number: \_\_\_\_\_

Please indicate any medical condition or allergies we should be aware of: \_\_\_\_\_

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RETURN TO: \_\_\_\_\_

DIANNE LUND

GPRC, Event Planner

**PH:** 780.835.6682

**E-MAIL:** dlund@gprc.ab.ca

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# Release

The information provided will be protected under the Freedom of Information and Protection of Privacy Act of Alberta (FOIP).

The personal information below will be used and disclosed of as follows;

For the purpose of promoting the achievements of Grande Prairie Regional College and the success of the student s, staff, faculty and the College community, the person named herein grants to the College the right to use:

his/hername

his/herphotograph(s)

his/herstatements and/or testimonials

a specific item of creative work by him/her

for commercial advertising or in publicity materials.

\_\_\_\_\_  
Name (Print clearly)

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

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

RETURN TO:

\_\_\_\_\_  
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