



# ANNUAL GIRLS CAMP 2026

# Camp St. Philomena

July 19 - 24

\$200 per person    Ages 10-18    Register by July 1

## Tons of Fun!

- Lake Day
- Swimming
- Water Slide
- Tea Party
- Choir
- Skits
- Roller Skating
- Sports
- Crafts
- Glow Party

## Spiritual Highlights

- Daily Mass / Sing a High Mass
- Rosary and Prayers
- Confessions
- Catechism Class
- Opportunity to speak with a spiritual director



girlscamp@cmri.org  
www.cmri.org/girls-camp

8500 N St. Michael's Rd.  
Spokane, WA 99217

Phone: (509) 598 - 0156  
Fax: (509) 467 - 2425

Hosted by the Marian Sisters of St. Michael's Convent

**Camper Information**

Camper's Name \_\_\_\_\_ Likes to be called \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade in September 2025 \_\_\_\_\_

For those in Jr. High and High School sleeping outside in tents is possible. Are you interested? YES NO

Home address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Camps previously attended \_\_\_\_\_ How did you learn about CSP \_\_\_\_\_

I can swim, but only with a life jacket     I can swim without a life jacket

**Parent/Guardian Information**

Parents' Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ Cell Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Camp T-Shirt \*all sizes are adult

SM \_\_\_\_\_ MED \_\_\_\_\_ LG \_\_\_\_\_ XL \_\_\_\_\_ XXL \_\_\_\_\_

**Transportation:**

I will be arriving with my \_\_\_\_\_ (Check-in time is 2-3 pm Sunday, July 19th)

I will be picked up by my \_\_\_\_\_ (Check-in time is 1 pm Friday, July 24th)

- If you need to be picked up from the airport, please contact the Sisters directly with the information

**Confidential Camper Information:**

Health concerns we should know about (please describe) \_\_\_\_\_

Food Allergies (list all) \_\_\_\_\_

Other (list all) \_\_\_\_\_

**General Expectations:**

At Camp St. Philomena, trust, communication, honesty, and respect are keys to a successful camp. Although some expectations and rules may be decided within a camp group, there are some that are simply not negotiable that relate to safety, the law, and camp standards. Examples include properly using and caring for all equipment, and remaining in the supervision of a staff member at all times. For health, safety, privacy, or other reasons, repeated failure to adhere to such standards may lead to dismissal from camp. The following is absolutely not permitted by campers or staff at CSP: Possession of firearms or other weapons, the use and/or possession of illegal drugs or alcohol, and the use of any tobacco products. Disregarding these policies leads to dismissal. Leaving early from Camp is disruptive to the morale and schedule. There are some girls who live far away and cannot leave mid-week. If you choose to leave early you may not return to Camp the following year.

**AGREEMENT:**

We, the undersigned parents (or guardians) of the camper named on this application (hereafter referred to as "the child"), acknowledged that we are aware of the types of activities in which the child will be participating during her attendance at Camp St. Philomena during the 2026 season and that we have been given ample opportunity to ask any questions which we may have about the environment in which the child will live and the activities in which she will participate during her attendance at Camp St. Philomena. We are aware of the risks that are inherent in the operation of my children's camp and in the child's participation in all camp activities on or off the premises of said camp including, but not limited to, hiking, athletics, swimming, etc.

We agree to provide current health records upon request. We acknowledge that we have given Camp St. Philomena full disclosure of any physical or mental conditions, challenges, or problems that the child has which might limit her ability to participate in any camp activities or which might endanger any other child attending Camp St. Philomena while participation in camp activities. In case of emergency, we hereby give permission to the physician selected by the camp director to hospitalize, secure proper treatment for, and order injection, anesthesia, or surgery for the child. We understand that all medical bills incurred for treatment or illness are our responsibility and will be forwarded to us for payment.

We grant permission to use any photograph, video, or written material relating to the child in any Camp promotions and on the camp web page.

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

*(If only one signature, consent of the other parent is implied.)*

I promise to abide by the rules of Camp St. Philomena, to show integrity, and to participate in a positive manner.

Camper's Signature \_\_\_\_\_ Date \_\_\_\_\_