

Summer Camp Registration form

Student information:

Name : _____ Date of Birth (d/m/y): _____

Address: _____ Grade: _____

_____ School: _____

_____ Postal Code: _____

Areas of Concern (if any):

Health Information:

Allergies/ Medical concerns:

Health Card Number: _____

Parent/ Guardian Information:

Full Name : _____

Relationship to student: _____ Home Phone: _____

Address: _____ Cell phone: _____

_____ Work phone: _____

_____ Email: _____

Emergency Contact:

Full Name: _____ Relationship to student: _____

Home Phone: _____ Cell Phone: _____

Who is allowed to pick up your child?

Summer Camp Enrollment: _____

Please check one of the following programs:

- | | |
|----------------------------------------------------------------|---------------------------------------------------------------|
| <input type="checkbox"/> Leadership & Friendship (July 4 – 15) | <input type="checkbox"/> Junction Art (Aug 2 –12) |
| <input type="checkbox"/> Environmental Explorer (July 18 – 29) | <input type="checkbox"/> Theatre and Drama Camp (Aug 15 – 26) |
| <input type="checkbox"/> Math Camp (July 4-15) | <input type="checkbox"/> Math Camp (Aug 2-12) |
| <input type="checkbox"/> French Camp (July 18-29) | <input type="checkbox"/> Booster Week (Aug 29- Sept 2) |
| <input type="checkbox"/> French Camp (Aug 15-26) | |

*Camp runs between 9 AM and 4 PM.

**Before-care (8:30 am) and After-care (until 6:00 pm) is available at an extra charge (\$15/day)

Total Cost for Camp: _____ Registration/ Assessment: _____ Total Cost: _____

Payment:

Payment can be made by credit card, cash or by cheque payable to: Oxford Learning, High Park.
The cheque should be dated for June 1st, 2016.

Cancellations require written notice and we will charge a non-refundable deposit of \$350.00 for all cancellations. We require one month written cancellation notice; all sessions cancelled with less than a month's notice are non-refundable.

- ☐ Cheque
☐ Cash
☐ Credit card: ☐ Visa ☐ MasterCard

Card Number: _____

Cardholder's name (exactly as printed on card): _____

CCV: _____

Exp: m_____ y_____

Signature: _____

Date: _____

I have read and understood the terms of enrolment.

Name of Parent/Guardian

Signature of Parent/ Guardian

Date