



SUMMER CAMP REGISTRATION FORM 2018

CAMPER INFORMATION

CURRENT GRADE:

LAST NAME:	FIRST NAME:	RCA STUDENT:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
BIRTHDATE: (MM/DD/YYYY)	AGE AS OF SEPT:	GENDER:	<input type="checkbox"/> M	<input type="checkbox"/> F
ADDRESS:	CITY:	POSTAL CODE:		

MAIN CONTACT

LAST NAME:	FIRST NAME:	GENDER:	<input type="checkbox"/> M	<input type="checkbox"/> F
ADDRESS:	CITY:	POSTAL CODE:		
HOME PHONE:	WORK PHONE:	CELL PHONE:		
EMAIL:				

SECONDARY CONTACT/ALTERNATE

LAST NAME:	FIRST NAME:	GENDER:	<input type="checkbox"/> M	<input type="checkbox"/> F
ADDRESS:	CITY:	POSTAL CODE:		
HOME PHONE:	WORK PHONE:	CELL PHONE:		
EMAIL:				

PROGRAM DAYS

<input type="checkbox"/> FULL DAYS (Monday to Friday)	<input type="checkbox"/> AM	<input type="checkbox"/> PM (Monday to Friday) (circle choice)
<input type="checkbox"/> PART-TIME (Please indicate days)	M	T W TH F

Dates	Days	Camp Fee	Lunch	Before/After Camp Care	Total Camp Fee	SIBLING	PAID
Jun 25 - Jun 29		\$	\$	\$	\$	[]	[]
Jul 03 - Jul 06*		\$	\$	\$	\$	[]	[]
Jul 9 - Jul 13		\$	\$	\$	\$	[]	[]
Jul 16 - Jul 20		\$	\$	\$	\$	[]	[]
Jul 23 - Jul 27		\$	\$	\$	\$	[]	[]
Jul 30 - Aug 03		\$	\$	\$	\$	[]	[]
Aug 07 - Aug 10*		\$	\$	\$	\$	[]	[]
Aug 13 - Aug 17		\$	\$	\$	\$	[]	[]
					TOTAL:		

* Short weeks: Closed Monday July 2, 2018-Canada Day and Monday, August 6, 2018-Civic Holiday.

** Lunch Option available to Campers 4 -8 years **18 months - 3.7 years lunch included**

Early Bird Bonus \$25.00 off
Register before April 30, 2018

FEE INFORMATION

- | | | |
|---|--|---|
| <ul style="list-style-type: none"> 18 Months - 3.7 Years 4 - 5 Years 6 - 8 Years Before Camp Care After Camp Care Lunch | <p>RCA Preschool Camper \$ 325.00/5 day week or \$ 65.00/day
New Camper \$335.00/5 day week or \$ 67.00/day</p> <p>RCA Camper \$ 300.00/5 day week or \$60.00/day
New Camper \$ 325.00/5 day week or \$ 65.00/day</p> <p>RCA Camper \$ 300.00/5 day week or \$ 60.00/day
New Camper \$ 325.00/5 day week or \$ 65.00/day</p> <p>\$5.00/day
\$5.00/day
\$5.00/day</p> | <p>Sibling Fee: \$308.75/week or \$ 61.75/day
Sibling Fee: \$ 318.25 or \$63.65/day</p> <p>Sibling Fee \$ 285.00/day or \$57.00/day
Sibling Fee \$ 308.75/week or \$ 61.75/day</p> <p>Sibling Fee \$ 285.00/day or \$57.00/day
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|---|--|---|

-Payment Method: Cash or Post-Dated Cheque(1st of each month)
-Tax Receipts issued at end of Summer
-Sibling Discount of 5% of camp fee
-Payment required 4 weeks in advance

-No refunds for unused days
-Private Tutoring available at an additional cost (if requested)
-Weekly/daily rates do not include before and after camp care
-Camp RoyalCrest reserves the right to cancel sessions if there is insufficient enrollment



SUMMER CAMP REGISTRATION FORM

MEDICAL INFORMATION

DOCTOR'S NAME

TELEPHONE

ADDRESS:

CITY:

POSTAL CODE:

HEALTH CARD #:

☐ Copy of Immunization records

☐ Copy of Birth Certificate

HEALTH HISTORY AND PERSONAL INFORMATION

The more information you can provide, the better we can meet the needs of your child. This information will be used by the CAMP ROYALCREST Staff. If there is additional information of a sensitive nature, please feel free to send a separate letter marked 'confidential' to the attention of Program Manager. All information you send to us will be treated with confidence and respect.

Is the participant under any form of treatment for an illness, condition or injury?

☐ Yes

☐ No

If yes, please explain and detail routines and medications.

Does your child have any medical or behavioural condition that we should be aware of:

☐ Yes

☐ No

If yes, please take a moment to explain.

☐ Carries EPI-PEN

☐ Carries Puffer

☐ Wears Medic-Alert Bracelet

For: _____ For: _____ For: _____

ALLERGIES

Seasonal: _____

Drugs: _____

Food: _____

Insect: _____

Other: _____

DIETARY NEEDS OR RESTRICTIONS (please provide details below): Please circle

☐ Gluten Free ☐ Lactose intolerant ☐ Vegetarian ☐ Other

CONFIRMATION, PAYMENT, CANCELLATIONS AND REFUNDS

Camp registration is complete once fees have been paid and forms completed. Payments may be made by cash or cheque only. Cheques are to be made payable to RoyalCrest Academy. Requests for cancellations or refunds must be made in writing and submitted to the CAMP ROYALCREST office. Requests for refunds received prior to 28 days will receive a refund minus an administration fee of \$25.00. Refund requests received with less than 28 days notice are subject to an administration fee of \$50.00. Refund requests that are received after 12PM on the Friday before the program session starts will not qualify for a refund. A doctor's note is required for cancellations due to medical reasons. Refunds are not granted for inclement weather. NSF cheques are subject to an administration fee of \$50.00.

I have read and understand the content of the CAMP ROYALCREST registration form. I understand in the case of an emergency; if parents are deemed unreachable, CAMP ROYALCREST will contact the alternate emergency contact. I authorize CAMP ROYALCREST to call 911 and disclose any information necessary

AUTHORIZATION

Signature: _____ Date: _____