

Ryde Lake Camp Camper Registration 2016

Name of Camper _____

HEALTH CARD # _____ Date of birth (D/M/Y) _____ Age at camp _____ School grade (as of Sept 2016) _____

Address _____ City/Town _____

Postal Code _____ Home phone # _____

Parent E-mail(s) _____

Mother's Name _____ Work # _____ Cell # _____

Father's Name _____ Work # _____ Cell # _____

Emergency Contact Name _____ Relationship _____

Emergency Contact Phone _____ Cell # _____

Name of cabin mate requested: _____

Every effort is made to honor requests for one cabin mate of the same age/grade.

Years at Ryde _____ Has your daughter attended other overnight camps? _____ Where/when? _____

New families: How did you hear about Ryde? _____

Is your camper on regular medication? Yes () No () Does your camper have any food restrictions? Yes () No ()

Does your camper have any physical, emotional, mental, or behavioral weaknesses or problems? Yes () No ()

If "Yes" to any of the above, please attach a brief note of explanation.

Please indicate your choice of session:

() Session 1 - \$525.00 Sun July 3 - Sat July 9 () Session 3 - \$525.00 Sun July 17 - Sat July 23

() Session 2 - \$525.00 Sun July 10 - Sat July 16 () Session 4 - \$525.00 Sun July 24 - Sat July 30

TOTAL FEE AMOUNT: _____

PAYMENT OPTIONS:

1) **CHEQUE OR MONEY ORDER** (Canadian funds) MADE PAYABLE TO: RYDE LAKE CAMP

2) **INTERAC E-TRANSFER** through your online banking. Send to: office@rydelakecamp.com

Alternate payment plans are available. Contact Director - Fran Sugawara at the Camp Office for details

PAYMENT SUMMARY:

1) CHEQUE/MONEY ORDER

I am enclosing my cheque/money order of \$ _____ as () a deposit (\$100./session) or () full payment

I am also enclosing my cheque of \$ _____ for the balance, postdated May 15, 2016

2) INTERAC E-TRANSFER

I have sent my payment of \$ _____ as () a deposit (\$100./session) or () full payment via Interac e-Transfer on _____ (date)

Conditions of Enrolment

1. The Camp Director reserves the right to dismiss a camper who in her opinion, has displayed unacceptable behaviour and/or has not complied with the rules of the camp.
2. The parent(s)/guardian(s) submitting this registration are those having legal custody over the child. Conditions of custody and access, if applicable, should be fully communicated in writing to the camp.
3. I hereby give permission for Ryde Lake Camp to use images of my child for camp-related programs and promotions. This includes, but is not limited to: slide shows, camp video, web site images, plaques, and promotional material.
I understand and accept the conditions of enrolment.

Parent/Guardian name (print) _____

Parent/Guardian signature _____ Date _____

All forms must be signed and completed in full by parent/guardian.

Registration will be confirmed only upon receipt of the deposit (sent by mail or electronic transfer).

Send to: Ryde Lake Camp Office Box 1120 Gravenhurst ON P1P 1V4 or office@rydelakecamp.com

