March Break Camp 2022 Where all the fun begins

Family Name:	Email Address:

Parent's Information

Mother's Name:	Work/Cell:
Father's Name:	Work/Cell:

Emergency Contact:

Name:	Relation:	Phone Number:

Who should we contact first?_____

Are you in our Database (attended camp or had a party)? ☐yes ☐yes (update needed) ☐no

If not or your information has changed, please fill in your address below:

Address:		
City:	Province:	Postal Code

Waiver

I hereby release Active Kids Zone Inc. from all claims for damage arising from any accident and/or injury which may be caused by or arise from participation of the applicant herein, during any program or in any facility or at any location where a program is held. I understand that any photographs taken during the program(s) will be used solely for advertising purposes and may be posted on our website or other social media. In the event of a suspected or positive case of Covid-19, we will be following the protocol laid out in the Ministry of Health. You can see these procedures as well as the full list of guidelines on our website.

Cancellation Policy

Changes to Registered camp weeks (i.e. switching one week for another) must be made 2 weeks prior to the start of the Camp program and are subject to an administrative fee of $10.00 for each change. A refund will be available should a camper withdraw at least two weeks before the start of the Camp Program, subject to an administrative fee of $10.00. If a withdrawal occurs less than two weeks prior to start of the Program no refund will be issued. Payments cannot be transferred to other weeks once the program starts. No refunds will be issued for missed days due to illness or other personal reasons. The Directors of the Camp reserve the right to terminate the registration of any camper if, in their sole discretion, the Directors determine such termination to be in the best interest of the camper or the Camp with no refunds. <u>If we are not able to run camp on any of the weeks you registered for, you will receive a full refund.</u>

Parent/Guardian Signature:_____ Date:_____

Please let us know how you hear about us: ☐Previous Camp ☐Parties ☐Friend

☐Facebook ☐Instagram ☐Google ☐ Other:_____

Please complete the form below

First Child	Second Child	Third Child
Frist Name:	Frist Name:	Frist Name:
Sex: DOB: / / Age:	Sex: DOB: / / Age:	Sex: DOB: / / Age:
Allergies:	Allergies:	Allergies:
Health Card:	Health Card:	Health Card:
Group Requests:	Group Requests:	Group Requests:

Select Week	Lunch and Snacks??	Need Extend hours??	Select Week	Lunch and Snacks??	Need Extend hours??	Select Week	Lunch and Snacks??	Need Extend hours??
March 14-18	Both lunch Snacks	8 am drop off 5 pm pick up 6 pm pick up	March 14-18	Both lunch Snacks	8 am drop off 5 pm pick up 6 pm pick up	March 14-18	Both lunch Snacks	8 am drop off 5 pm pick up 6 pm pick up

Camp Fee	Number of Children		x $320 (5 days) =	
Food Option	Number of Children		x $40 (Lunch/snacks)=	
	Number of Children		x $25 (Lunch only)=	
	Number of Children		x $20 (Snacks only)=	
Extended Hours Option	Number of Children		x $35 (1 hour)=	
	Number of Children		x $60 (2 hours)=	
	Number of Children		x $80 (3 hours)=	
			Total	

Method of Payment

Cash Cheque Debit E-transfer		Authorized Signature:
Credit card Number:	Exp Date:	

Email completed form to fun@activekidszone.com

For Office use only

Date Received: _____ Staff Initials:_____ Entered: _____ DB:_____QB:_____