

CANADA HINDU HERITAGE CENTRE

SUMMER CAMP PROGRAM 2018

STUDENT REGISTRATION FORM

July 3rd, 2018 TO August 31st, 2018 (9 weeks)

Eligibility: Age between 4 to 12 Years ONLY

Fees: - \$180 (per week) (Field trips are charged separately)

Daily Fees - \$40.

\$25 for a pack of 3 T-shirts mandatory

10% discount for onetime payment for all 9 weeks before the beginning of the camp

(Additional child from same family- 10% Discount only on weekly basis)

Drop-off Time: 7:30 a.m.

Pick Up Time: 6:00 p.m.

NOTE: \$1 will be charged for each minute after 6:00 pm

Name of the Child: _____ Age: _____

Father's Name: _____ Mother's Name: _____

Address: _____

Father's Business /Cell No. _____ Mother's Business/Cell No. _____

Family Doctor: _____ Doctor's Contact No.: _____

Medical Card No. _____

EMERGENCY CONTACT

Name: _____

Address: _____

Contact No. _____ Or _____

Medical Problems: (Please state if any) _____

Name and Contact No. of Person responsible to pick up the child: _____

Drop off time of child at the Mandir: _____

Number of weeks attending the Camp: _____

Please inform 4 weeks in advance for participating in last 3 Field Trips or for the week

I hereby give CHHC permission for the following:

- To act on my behalf in case of emergency.
- To have my child's picture taken and shown on TV, Video, Website, Mandir facebook account, and magazine if required.
- I agree that as a participant in the camp my child/ward will participate in activities at a variety of other locations. I agree that the choice to participate brings with it the assumptions of those risks and results which are part of these activities. I agree that the CHHC, MRM, their trustees, officers, employees and volunteers shall not be liable for any injury to my child/ward or loss or damage to my child's personal property arising from or in any way resulting from my child's participation in these activities.

Parent's Signature: _____

Date: _____