



# CAMP KATONIM

## 2009 FEE SCHEDULE AND CALCULATOR

### NEIGHBOURING COMMUNITY

(For fees received between April 1, 2009 and June 15, 2009)

#### **FULL DAY CAMPERS**

<b>8 Weeks</b>	\$ 2720	x _____ # of children	\$ _____
<b>4 Weeks Minimum</b>	\$ 1520	x _____ # of children	\$ _____
<b>1 Week Increments</b>	\$ 385	x _____ # of children x _____ # of weeks	\$ _____

> 4 OR < 4 and > 8 weeks

#### **HALF DAY NURSERY** (must be toilet trained) (1:3 staff: camper ratio)

<b>8 Weeks</b>	\$ 1960	x _____ # of children	\$ _____
<b>4 Weeks Minimum</b>	\$ 1080	x _____ # of children	\$ _____
<b>1 Week Increments</b>	\$ 275	x _____ # of children x _____ # of weeks	\$ _____

> 4 OR < 4 and > 8 weeks

#### **LIT/CIT PROGRAM** (children aged 15 & 16 by Dec 31, 2009)

<b>8 Weeks</b>	\$ 1950	x _____ # of children	\$ _____
<b>4 Weeks Minimum</b>	\$ 1120	x _____ # of children	\$ _____
<b>1 Week Increments</b>	\$ 290	x _____ # of children x # of weeks	\$ _____

> 4 OR < 4 and > 8 weeks

#### *Family Discount for Multiple Children – applicable for full-day campers only*

3 <sup>rd</sup> Sibling	Deduct	\$20 per week x _____ # of weeks =	\$ ( _____ )
4 <sup>th</sup> Sibling or more	Deduct	\$30 per week x _____ # of weeks =	\$ ( _____ )
<i>Total</i>			\$ ( _____ ) (a)

### **PAYMENT IN FULL IS DUE WITH SUBMISSION OF REGISTRATION & FEE FORMS**

Sub Total	\$ _____
(Less Family Discount)	\$ ( _____ )
<b>BALFOUR BEACH RENTERS DEDUCT 10%</b>	\$ ( _____ ) (a)
Balance Enclosed	\$ _____

#### Cancellation Policy

There is a \$200 non-refundable processing fee per registration for any cancellation.  
There are no refunds after June 1, 2009 without medical documentation.

Please send completed (i) Registration Forms, (ii) Fee Schedule & (iii) Cheques, (payable to Camp Katonim) to:

**Camp Katonim**  
577 Old Orchard Grove  
Toronto, Ontario M5M 2H2