



# CAMP KATONIM

## 2009 CAMPER REGISTRATION FORM

Season: Monday, June 29, 2009 to Friday, August 21, 2009  
 Hours: Monday to Friday, 9:00 a.m. to 4:30 p.m.

1. **CAMPER'S NAME:** \_\_\_\_\_ **Gender** **M** **F**  
 (Last) (First) (please circle)  
**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Grade completed:** \_\_\_\_  
 (Month) (Day) (Year) (as of June 2009)
2. **CAMPER'S NAME:** \_\_\_\_\_ **Gender** **M** **F**  
 (Last) (First) (please circle)  
**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Grade completed:** \_\_\_\_  
 (Month) (Day) (Year) (as of June 2009)
3. **CAMPER'S NAME:** \_\_\_\_\_ **Gender** **M** **F**  
 (Last) (First) (please circle)  
**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Grade completed:** \_\_\_\_  
 (Month) (Day) (Year) (as of June 2009)
4. **CAMPER'S NAME:** \_\_\_\_\_ **Gender** **M** **F**  
 (Last) (First) (please circle)  
**Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Grade completed:** \_\_\_\_  
 (Month) (Day) (Year) (as of June 2009)

**MAILING ADDRESS:**

Street \_\_\_\_\_ Apt # \_\_\_\_\_  
 City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

**SUMMER ADDRESS:**

(If different from mailing address)

**SUMMER PHONE:** \_\_\_\_\_

**EMERGENCY CONTACT: Phone:** \_\_\_\_\_ **Relation to camper** \_\_\_\_\_

**PARENT INFO:**

	<b>MOTHER</b>	<b>FATHER</b>
<b>Full Name</b>		
<b>Home Phone</b>		
<b>Business Phone</b>		
<b>Cell Phone</b>		
<b>E-mail Address</b>		

**DATES ATTENDING**

		CAMPER 1	CAMPER 2	CAMPER 3	CAMPER 4
	<i>NAME:</i>				
Week 1	(June 29 –July 3)				
Week 2	(July 6 – 10)				
Week 3	(July 13 – 17)				
Week 4	(July 20 – 24)				
Week 5	(July 27 –31)				
Week 6	(Aug. 3 – 7)				
Week 7	(Aug. 10 – 14)				
Week 8	(Aug. 17 – 21)				
Last Red Cross swimming level successfully completed:					

**Bussing:**

I do not require bussing: \_\_\_\_\_

I do require bussing: \_\_\_\_\_

Please indicate your preferred bus stop and sign below:

- Thornhill: Garnet Williams \_\_\_\_\_
- Thornhill: Thornhill Community Church (Bayview/John) \_\_\_\_\_
- Richmond Hill Church: \_\_\_\_\_
- Newmarket: \_\_\_\_\_

If you require a different bus stop other than indicated above, please contact the director to see if an additional stop may be arranged.

I am aware that the bussing is included in my fees. As part of registering for bussing, I agree to have my child at the arranged stop at the given time. (Times will be determined closer to the summer). Should my child be unable to make the stop or I wish to participate in alternative transportation for any particular day, I will give due notice to Camp Katonim. No- show children result in transportation delays and may be charged a no-show fee. We appreciate your co-operation in this matter.

Parent signature \_\_\_\_\_

**Additional Fees**

During the summer, Camp Katonim offers additional programming i.e. late nights or overnights, out of camp field trips etc. Some of these activities may require additional fees. These activities are not mandatory and if your child does not wish to participate, there will be alternate programming available.

Any additional fees charged relate to the direct costs of participation and are always subsidized by the camp. Should you have any questions, please contact the director.

