



**REGISTRATION POLICY - PLEASE READ**

- **Camp Space** - Age and grade are considered in determining available space in the session(s) of your choice.
- **Refusals** - York Professional Care & Education reserves the right to refuse a registration form based on previous behaviour, misconduct or lack of resources to meet a child's medical needs.
- **Income Tax Receipts** - Tax receipts for fees paid will be issued at the end of the year. Please inform the office of any address changes.
- **NSF Payments/Cheques** - A \$40.00 service charge will be levied on all NSF payments and replacement cheques including the service charge must be certified.

**CANCELLATION AND REFUND POLICY**

- York Professional Care & Education reserves the right to cancel any camp session if a minimum number of participants have not registered two weeks prior to the program starting and post dated cheques will be returned.
- Camp fees less the non-refundable deposit will be returned up to four weeks prior to a camp session beginning. Thereafter, they are refundable only for medical reasons with a doctor's certificate.
- Refunds are not granted if parent/guardian withdraws camper from the sessions early, or if the camper is sent home for misconduct or for arriving with a communicable disease.
- **All requests for refunds must be made in writing to the Agency.**

**AUTHORIZATION**

In registering and permitting the camper ..... (child/camper) to attend a York Professional Care & Education Camp, I the undersigned parent, guardian or other duly authorized party hereby agree as follows:

I understand that the camper will participate in the full program and all camp activities.

I understand that York Professional Care & Education reserves the right to dismiss a camper who, in their opinion, is a hazard to the safety or rights of others, or who appears to have rejected the reasonable expectations of the camp, or who arrives with a communicable disease, and that I am responsible to provide their transportation home.

I have read and understand the registration, cancellation and refund policy.

I understand that photographs and/or videos taken at programs may be used for promotional material, including website.

My signature on this application gives the Camp Director/Designate permission to transport the Camper to a nearby physician or hospital, and to authorize medical treatment necessary for the Camper's welfare and good health, including ordering the administration of medication, injections, anesthesia, surgery, or any other medical procedures deemed necessary in the circumstances by the treating physician. I understand and agree that where possible, the Camp will attempt to notify me before seeking and obtaining medical attention. However, if I cannot be contacted or in the event of an emergency, I authorize the Camp to obtain immediate medical treatment for the Camper and to notify me as soon as possible.

I agree to reimburse the Camp for any additional expenses that may result from the provision of the above medical services and/or transportation for medical care. I also confirm that the Camper is covered by the Ontario Health Insurance Plan or equivalent medical insurance.

I hereby release the Summer Day Camp and York Professional Care and Education Inc. (individually and together hereinafter referred to as the "Camp"), its trustees, directors, related corporations, employees, staff and agents from liability for any loss, personal injury, accident, misfortune or damage to the Camper of his/her property, with the understanding that reasonable precautions shall be taken to ensure the health and safety of the Camper. I acknowledge that the Camper attends the Camp and participants in its activities at his/her own risk.

\_\_\_\_\_ Date

\_\_\_\_\_ Parent/Guardian Signature

<b>For Office Use Only: Initial:</b> _____	
<input type="checkbox"/> Registration Received on: _____	<input type="checkbox"/> Payment Amount: \$ _____
<input type="checkbox"/> Health Form Attached	<input type="checkbox"/> Immunization Form Attached
<input type="checkbox"/> Package sent to family on: _____	<input type="checkbox"/> Combo Camp info given to HB

# Adventure Camp 2010 Health History Form

Camper Name: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
month date year

**It is mandatory that a photocopy of your child's immunization card be submitted with this form.**

**Physicians Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Important:** Does your child have any of the following challenges/restrictions:

physical     emotional     behavioural     dietary     allergies

other \_\_\_\_\_

If yes, please state details very clearly:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please state if your child has a life threatening allergy and if an epi-pen is required:**

\_\_\_\_\_  
\_\_\_\_\_

**Family:** Have there been any significant changes in recent family relationships?

\_\_\_\_\_  
\_\_\_\_\_

Is there a custody order in place? If so, please send a copy of the order to the camp.

\_\_\_\_\_

Please provide any further comments/suggestions that would be helpful.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date



## Dates & Rates Summer 2010

If you wish to enrol your child for more than 2 weeks, please review our Multi Sessions Discount Section for further savings. Please inquire for family discounts.

Sessions	Dates	Total without busing	Bus Required	Payment Schedule		
				Deposit	March 1	May 1
1	July 5 - July 16	\$499.00	\$75.00	\$100.00 + bus	\$199.50	\$199.50
2	July 19 - July 30	\$499.00	\$75.00	\$100.00 + bus	\$199.50	\$199.50
3	Aug. 3 – Aug. 13 (closed Aug. 2)	\$449.00	\$67.00	\$100.00 + bus	\$174.50	\$174.50
4	Aug. 16 – Aug. 27	\$499.00	\$75.00	\$100.00 + bus	\$199.50	\$199.50
Back to school	Aug. 30 – Sept. 3	\$299.00	\$37.50	\$100.00 + bus	\$ 99.50	\$ 99.50
<b>Best Value Multi Sessions Discount</b>						
1 & 2	July 5 - July 30 (Savings \$78.00)	\$920.00	\$150.00	\$200.00 + bus	\$360.00	\$360.00
1 & 3	July 5 – 16, Aug. 3 – 13 (Savings \$63.00)	\$874.00	\$142.50	\$200.00 + bus	\$337.00	\$337.00
1 & 4	July 5 - 16, Aug. 16 – 27 (Savings \$78.00)	\$920.00	\$150.00	\$200.00 + bus	\$360.00	\$360.00
2 & 3	July 19 - 30, Aug. 3 – 13 (Savings \$63.00)	\$874.00	\$142.50	\$200.00 + bus	\$337.00	\$337.00
2 & 4	July 19 – 20, Aug. 16 – 27 (Savings \$78.00)	\$920.00	\$150.00	\$200.00 + bus	\$360.00	\$360.00
3 & 4	Aug. 3 – 13, Aug. 16 – 27 (Savings \$63.00)	\$874.00	\$142.50	\$200.00 + bus	\$337.00	\$337.00
1, 2, 3	July 5 – 16, July 19 – 30, Aug. 3 - 13 (Savings \$227.00)	\$1220.00	\$217.50	\$300.00 + bus	\$460.00	\$460.00
1, 2, 4	July 5 – 16, July 19 – 30, Aug. 16 – 27 (Savings \$237.00)	\$1260.00	\$225.00	\$300.00 + bus	\$480.00	\$480.00
2, 3, 4	July 19 – 30, Aug 3 – 27 (Savings \$227.00)	\$1220.00	\$217.50	\$300.00 + bus	\$460.00	\$460.00
1, 3, 4	July 5 – 16, Aug. 3 – 27 (Savings \$277.00)	\$1220.00	\$217.50	\$300.00 + bus	\$460.00	\$460.00
1, 2, 3, 4	July 5 – 30, Aug 3 – 27 (Savings \$464.00)	\$1482.00	\$292.50	\$400.00 + bus	\$541.00	\$541.00

Combo Camp 1 week at Hidden Bay & 1 week at Adventure Camp <a href="http://www.hiddenbay.ca">www.hiddenbay.ca</a>		Total without Adventure Camp Bus	Adventure Camp Bus Required	Payment Schedule		
				Deposit	March 1	May 1
Combo A <input type="checkbox"/>	July 5 – July 9 (Hidden Bay) July 12 – July 16 (Day Camp)	\$788.50	\$37.50	\$200.00 + bus	\$294.25	\$294.25
Combo B <input type="checkbox"/>	July 19 – July 23 (Hidden Bay) July 26 – July 30 (Day Camp)	\$788.50	\$37.50	\$200.00 + bus	\$294.25	\$294.25
Combo C <input type="checkbox"/>	Aug. 16 – Aug. 20 (Hidden Bay) Aug. 23 – Aug. 27 (Day Camp)	\$788.50	\$37.50	\$200.00 + bus	\$294.25	\$294.25

## Transportation

Adventure Camp busing will be provided to and from Richmond Hill, Markham, Stouffville, Aurora, Newmarket, Holland Landing. Please inquire about specific locations, subject to demand. You may provide your own transportation to and from camp. Drop off time is 9:00 a.m. and pick up time is 4:20 p.m. Transportation to and from Hidden Bay Leadership Camp is included in your combo camp price and will be provided from Aurora or Barrie.

## How to Register

Completed registration/health forms can be faxed, emailed, mailed or delivered in person to your local YPCE centre or 15203 Yonge St., Aurora, L4G 1L8. Telephone: (905) 841-1314 ext. 34, Fax: (905) 841-8889, Email: [kidsclub@ypce.com](mailto:kidsclub@ypce.com)

Faxes and emails must be accompanied by a valid credit card. (Only VISA is accepted).

Applications are accepted on a first-come first-serve basis. Spaces cannot be reserved without a fully completed application form accompanied by, full payment or deposit and post dated cheques or valid credit card.

All cheques are payable to YPCE.

An information package containing transportation and other helpful materials will be forwarded to you at a later date.