



Registration Form

(For Afternoon Camp 11:30am-5:30pm, Jul. 2 - Aug. 2, 2019)

Student

Name: _____ Date of Birth: _____ M
Last Name First Name yyyy-mm-dd F

Address: _____
Street City Province Postal Code Tel. (H)

Allergies/medical conditions we should be aware of: _____

Parents / Guardians

Name Tel. (W) Tel. (C) Email (required, please print clearly)

Name Tel. (W) Tel. (C) Email

Program & Fees (Lunch order optional. Menu and instructions to be provided by email during summer camp.)

Language:

- Mandarin
- Russian
- Spanish

	5 weeks	4 weeks or less
<input type="checkbox"/> Week 1 (Jul. 02 - 05):	\$122	\$130
<input type="checkbox"/> Week 2 (Jul. 08 - 12):	\$122	\$142
<input type="checkbox"/> Week 3 (Jul. 15 - 19):	\$122	\$142
<input type="checkbox"/> Week 4 (Jul. 22 - 26):	\$122	\$142
<input type="checkbox"/> Week 5 (Jul. 29 - Aug. 2):	\$122	\$142

Total: \$ _____

Cash Cheque, payable to: **KC Afterschool**

Interac e-Transfer to: registration@kcafterschool.com (send security code by text to: 613-263-7846)

Consent

I hereby consent to the inclusion of any photographs of my child in hall displays, class projects or other promotion related to the summer camp program. Yes; No (Your child will be excluded from class photos.)

I would like to be informed by email of the next year's summer camp. Yes; No

Registration and Cancellation

Detailed registration instructions: KCAfterschool.com

Cancellation: Full refund if cancelled on or before June 8, 2019. Cancellation charge 10% thereafter. Seven days email notice is required. If changed from full-time (5 weeks) to part-time, part-time rates apply for the remaining weeks. Cancellation can be made by week, not by day. Bank charge applies for cheque returned as "Non-sufficient funds" (NSF).

Release and Indemnification

I, the undersigned, understand that there is a risk of injury, loss, and/or damage involved in my child's participation in these activities. In consideration of the opportunity of my child's participation in these activities, I hereby release and indemnify the KC Afterschool, its subsidiaries, affiliates, and successors, as well as their officers, directors, employees and agents, from any and all rights, claims, demands, damages, costs, expenses, or causes of action of any kind whatsoever arising as a result of my child's direct or indirect participation in these activities.

Signature: _____ Date: _____
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We reserve the right to cancel any program due to lack of registration or other reasons.

Office use only:

Receipt # _____

Log

(Form updated: Mar. 02, 2019)