



SUMMER CAMP 2011 APPLICATION FORM
(Please complete a separate application for each child)

CHILD'S NAME: _____ Sex: _____

Date of Birth (d/m/y): _____ Age (by July 1): _____

Mailing Address: _____

City/Province: _____ Postal Code: _____

MOTHER'S NAME: _____

Address (if different from child): _____

Home Telephone #: _____ Work Telephone #: _____

Cell Phone #: _____ E-mail: _____ *

FATHER'S NAME: _____

Address (if different from child): _____

Home Telephone #: _____ Work Telephone #: _____

Cell Phone #: _____ E-mail: _____ *

CAMP SESSIONS: Each weekly camp session runs Monday to Friday from 9:00 a.m. to 12:00 p.m. Camp is suitable for 2 ½ to 4 ½ year olds. Camp fees include snack, all activities and early morning drop-off at 8:45 a.m.

Please indicate week(s) of choice:

- Week 1 (June 20-24)**
- Week 2 (June 27-June 30, excluding Canada Day)**
- Week 3 (July 4-8)**
- Week 4 (July 11-15)**
- Week 5 (July 18-22)**
- Week 6 (July 25-29)**
- Week 7 (August 2-5, excluding Civic Holiday Aug 1)**
- Week 8 (August 8-12)**
- Week 9 (August 15-19)**

FEES: Each one-week session is \$190.00 with the exception of weeks #2 and #7 which are 4 day weeks and \$150.00 Please enclose a post-dated cheque including payment for all sessions requested dated May 1, 2011, payable to **Oriole Nursery School**. Full payment must be included with every application to reserve a space for your child.

CANCELLATIONS AND REFUNDS: All refunds are subject to a \$25.00 administration fee. Full refunds will be given for cancellations prior to May 1st, 2011. For cancellations up to June 1st, a 50% refund will be given. No refunds will be given after June 1st, 2011.

Please find the enclosed cheque for \$ _____ for _____ week(s) as noted.

PLEASE RETURN YOUR COMPLETED APPLICATION AND FEES TO:
Summer Camp at Oriole, 1570 Yonge Street, Toronto, ON M4T 1Z8

*Tax Receipts will be emailed to parents – please provide email address.

For questions contact Laura Roland at (416) 704-9381 or roland.laura@gmail.com