



Appleseed Childcare Centre
Summer Camp Registration Form 2022
Phone: (519) 833-0994 Fax: (519) 833-0420
Email: appleseedccc@hotmail.com

Appleseed will be attempting to operate a Summer Camp program at Brisbane Public School for the months of July and August 2022. Appleseed's ability to operate this program will be dependent on the directives from the Wellington-Dufferin-Guelph Public Health unit and the provincial restrictions during the COVID-19 pandemic. However, at this time, we have been given permission to begin the registration process for summer camp.

If you would like to register your child for the Appleseed Summer Camp program this year, please indicate the weeks you will need care for your child. Registration is by the week to maintain one cohort each week. There will be no part-week registrations available. A place in the summer camp program will be reserved for your child for that week. You will be billed based on the information given on this form - not on your child's actual attendance. A week's notice will be required for cancellation. Cancellations received with less than a week's notice will still require payment. If the Summer Camp program is closed by the province or Public Health, all summer camp fees will be refunded.

Please complete this form and return it to Appleseed to reserve your child's spot in Appleseed's Summer Camp program for July and August 2022.

Child's Name	Date of Birth	Grade In September 2022
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Home Address

Mother's Name	Mother's Email
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Mother's Home Address	Mother's Work Address
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Mother's Home Phone Number	Mother's Work Phone Number	Mother's Cell Phone Number
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Father's Name	Father's Email
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Father's Home Address	Father's Work Address
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Father's Home Phone Number	Father's Work Phone Number	Father's Cell Phone Number
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Local Emergency Contact (other than parent)	Local Emergency Contact Phone Number
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Please list those authorized persons to whom your child may be released

Child's Family Physician	Family Physician's Office Phone Number
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Family Physician's Office Address

Child's Ontario Health Card Number (optional)

Does your child have any medical conditions or allergies? YES [] NO [] If yes, please explain below.

Does your child have any fears that we should know about? (i.e. dogs etc.)

Do both parents have legal custody of the child? YES [] NO [] If no, please provide details and a copy of the court order regarding access.

Program Registration

Please indicate the weeks you will need care for your child for the Summer of 2022. A place in the summer camp program will be reserved for your child for that week. You will be billed based on the information given on this form - not on your child's actual attendance. A week's notice will be required for cancellation. Cancellations received with less than a week's notice will still require payment.

Appleseed Week's of Summer Camp

<u>Please Check Desired Weeks</u>	<u>Weeks</u>	<u>Dates</u>	<u>Price</u>
	Week 1	July 4 – July 8	\$225.00
	Week 2	July 11 – July 15	\$225.00
	Week 3	July 18 – July 22	\$225.00
	Week 4	July 25 – July 29	\$225.00
	Week 5	Aug. 2 – Aug. 5 <small>*Closed Monday, Aug. 1st for Civic Holiday*</small>	\$180.00
	Week 6	Aug. 8 – Aug. 12	\$225.00
	Week 7	Aug. 15 – Aug. 19	\$225.00
	Week 8	Aug. 22 – Aug. 26	\$225.00
	Week 9	Aug. 29 – Sept. 2	\$225.00

Permissions

In the event of an emergency and my alternate contacts or I cannot be reached, I hereby give Appleseed staff my consent to act as any prudent parent and obtain reasonable medical care for my child.

_____ Signature of Parent _____ Parent Name Printed _____ Date

For Office Use			
_____ Registered for Requested Weeks	_____ In Data Base	_____ Added to HiMama Summer Camp Class	_____ In Summer Camp Email List