

SummerSkills 2010 Application Form

Camper Information:

Camper's Name: _____

Camper's Age: _____ Birth Date: _____

Parents' Names: _____

Address: _____

City: _____ Postal Code: _____

Home Phone: _____ Bus. Phone (Mom): _____ Cell Phone _____

Bus. Phone (Dad): _____ Cell Phone _____

Email Address: _____

Emergency Contact:

Name: _____ Relation to Camper: _____

Home Phone: _____ Bus. Phone: _____

Doctor: _____

Health Card #: _____

If your child has a disability please give a brief description:

Please indicate session choice		Full Day	Half Day (please indicate AM or PM)
Session 1 July 5 - 16	_____	\$877.00	\$500.00
Session 2 July 19-30	_____	\$877.00	\$500.00
Session 3 August 2 - 13	_____	\$789.00	\$450.00

Payment Procedures

Applications require:

- a **current deposit of \$300.00** (Half-day clients please pay the full amount)
- a **cheque dated June 1, 2010** for the balance

Applications will not be accepted unless accompanied by both cheques

Please make cheques payable to Laura Hunter's STEPS Programs Inc.

Refund Policy

All fees less a \$100.00 administration fee are refundable before June 1, 2010

All fees are non-refundable after June 1, 2010

Mail completed application to: Laura Hunter, 4852 Vandorf Sideroad, Stouffville, Ont., L4A 7X5

I have enclosed a deposit cheque of \$200.00 plus a cheque for the balance payable to Laura Hunter's STEPS Program Inc. **Please note that applications will not be accepted unless both cheques are included.**

I agree to give the program staff permission to act on my behalf in case of an emergency

I give permission for my child to be photographed/videotaped during these programs. Photographs may be used for promotional/educational purposes.

Parent's (or Guardian's) Signature: _____ Date: _____