

140 Brooke Street, Thornhill, Ontario L4J 1Y9 (905) 889-4543

CAMP REGISTRATION FORM – Returning Families

Child's Name:				Date:			
Session:	Session 1	Sess	sion 2	Session 3	Sess	Session 4	
	Session 5	Ses	sion 6	Session 7	Session 8		
Nursery	Half Day	Full Day		Kindergarten	Half Day	Full Day	
<u>Form</u>				<u>Signature</u>			
Registration Form							
Paren	tal Acknowled						
	eld Trips/Spec						
Multi Media Consent							
	phylactic Foo						
Immunization Record							
	Over the Co	unter					
With the al	oove signatures.	Lauthorize Thornh	nill Nursei	ry School to carry fo	rward the abo	ve forms for the	
Rotessa Direct Payment Terms				Deposit (non-refundable and currently dated applied to last			
Total Ou	tstanding (inc	\$		sessioi	n of camp) m	ade payable by	
Date of Balance to				Cheque			
be deducted June 1st, 20_					Rotessa		
					Signature		
					-		
For Office	ce Use Only	1					
Start Date:			Eı	End Date:			
Deposit	Paid: \$						