



# Grace Christian School of North York

## Summer Day Camp 2019

Child's Name: \_\_\_\_\_ M / F Birthday: \_\_\_\_\_  
 Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Health Card # : \_\_\_\_\_ Allergy: \_\_\_\_\_  
 Grade in Sep. 2018: \_\_\_\_\_ Language spoken at home: English \_\_\_ Mandarin \_\_\_ Cantonese \_\_\_  
 Mother's name: \_\_\_\_\_ Occupation \_\_\_\_\_  
 Bus. #: \_\_\_\_\_ Cellular #: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Father's name: \_\_\_\_\_ Occupation \_\_\_\_\_  
 Bus.#: \_\_\_\_\_ Cellular #: \_\_\_\_\_ How did you hear about us? \_\_\_\_\_

### Fee Schedule & Information (Children & LIT):

Code	Date	Camp Fee	Ext. Hours	Child	LIT	Subtotal
<b>Registration</b>		<b>\$25.00</b>				
<b>Week 1</b>	<b>Jul 02 – Jul 05</b>	<b>\$120.00</b>	<b>\$8.00</b>			
<b>Week 2</b>	<b>Jul 08 – Jul 12</b>	<b>\$150.00</b>	<b>\$10.00</b>			
<b>Week 3</b>	<b>Jul 15 – Jul 19</b>	<b>\$150.00</b>	<b>\$10.00</b>			
<b>Week 4</b>	<b>Jul 22 – Jul 26</b>	<b>\$150.00</b>	<b>\$10.00</b>			
<b>Week 5</b>	<b>Jul 29 – Aug 02</b>	<b>\$150.00</b>	<b>\$10.00</b>			
<b>Week 6</b>	<b>Aug 06 – Aug 09</b>	<b>\$120.00</b>	<b>\$8.00</b>			
<b>Week 7</b>	<b>Aug 12 – Aug 16</b>	<b>\$150.00</b>	<b>\$10.00</b>			
<b>Week 8</b>	<b>Aug 19 – Aug 23</b>	<b>\$150.00</b>	<b>\$10.00</b>			

Field trip fees are included in the tuition. Field trips will be confirmed one week before the trip day.

Hours of the camp 8:30am – 4:30pm; Extended Hours: 8:00am – 8:30am and 4:30pm – 6:00pm

If your child is still here at 4:30pm – who did not sign up for ext. hour /OR 6:00pm – with ext. hour, you must notify us and a fee of **\$1.00 per minute will be charged**. If you fail to notify us before 6:00pm CAS will be notified.

<b>Anniversary Rate (before June 30, 19)</b>	<b>\$130.00 / Week</b>	
	<b>Total Amount:</b>	

#### Terms of Payment:

Grace Christian School – Summer Day Camp accepts check with current date ONLY for payment of fees. Full payment is required upon registration if register for 4 weeks or less. If register for more than 4 weeks the balance must be paid by June 1, 2019. **Fee is 80% refundable if written cancellation is received before June 5, 2019.** No refund will be given thereafter. **There will be a charge of \$30.00 for each amendment requested if the space is available.** GCS reserves the right to refund fee and cancel registrations if any of the camp program is over or under subscribed. Any NSF checks will subject to a **\$50.00 charge** and we will accept cash ONLY for the full amount. Summer Camp receipts will be mail out by the end of September.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only:  
Paid \$ \_\_\_\_\_ Cash / Check # : \_\_\_\_\_

Staff Name & Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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## Release, Indemnity Agreement and Declaration

The undersigned agrees to release and discharge Grace Christian School of North York and Grace Chinese Gospel Church, it's directors, employees, agents and servants, of and from all claims of negligence or otherwise made by or on behalf of the applicants registered on the registration form, his or her guardians, or their executors, successors, administrator, against all claims, demands, judgments and costs in any way arising out of, or relating to the applicant's participation in Grace Christian School's Summer Day Camp program.

Parent / Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

We, the undersigned represent that all statement made are correct and acknowledge and agree to all terms and conditions of the applications. We further warrant that the applicant is physically capable of participating in the physical activity requested by this application.

Parent / Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Authorization

I hereby authorize the GCS – Summer Day Camp to allow and take applicant to participate those outing activities as scheduled during the Camp period.

Parent / Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I give permission for the GCS – Summer Day Camp to take pictures or video of my child during the camp. I understand that these images and video will be the property of the GCS – Summer Day Camp and they may use them for references and promotion of the camp in the future. These images and video will also be posted on GCS website and social media.

Parent / Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby authorize the applicant to walk home by him/herself.

Parent / Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Or the applicant will be picked up by: \_\_\_\_\_

Parent / Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Medical Information – This section must be completed

Doctor's Information:

Emergency Contact (other than parent):

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Relationship: \_\_\_\_\_

Is there any allergy, medical or special needs information that you would like us to know? If Yes, Please attach the details. YES \_\_\_\_\_ NO \_\_\_\_\_

**(Please note that Grace Christian School – Summer Day Camp is a Nut Free Zone.)**