



# Trinity United

400 Stevenson St. N., Guelph, ON N1E 5C3

Tel: 519-824-4800 Fax: 1-888-233-1862

[www.trinityunitedguelph.ca](http://www.trinityunitedguelph.ca)

[info@trinityunitedguelph.ca](mailto:info@trinityunitedguelph.ca)

## TRINITY PD Day Camp June 7, 2019, 8 am – 5 pm (Ages 6-12)

Child's Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

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

Postal Code \_\_\_\_\_

Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Home Email: \_\_\_\_\_

Child's Present Age: \_\_\_\_\_ Present School Grade: \_\_\_\_\_

Other Siblings attending this week of Camp \_\_\_\_\_

In case of emergency (when parent/guardian cannot be reached)  
please contact:

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

Telephone: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Please list any allergies the staff should be aware of:

\_\_\_\_\_  
\_\_\_\_\_

Person responsible for picking up the child at the end of each day:

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

Telephone: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

*Please be sure to complete the Photo Release Form on the back of this registration.*



## Registration Fee

Camp fee is \$25/child; \$20/child for each additional child in the family if more than 1 child in family being registered. Subsidies available. Please forward camp fee with Registration Form in cash or cheque payable to Trinity United Church. Cancellation without penalty within 1 week of camp. After this date, fees are non-refundable. Fees must be paid prior to start of camp.

## TRINITY CAMP Photo Release Form

I give my child \_\_\_\_\_  
permission to have a photograph taken at camp for use in Trinity United Church  
publications.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

### For Internal Use:

Registration fee received: \_\_\_\_\_

Date of receipt: \_\_\_\_\_

Notes: \_\_\_\_\_