



Canadian Adventure Camp

APPLICATION FORM 2019

15 Idleswift Dr.
Thornhill, ON.
L4J 1K9

Tel: 905-886-1406
Fax: 905-889-8983
Toll Free: 800-966-1406

info@canadianadventurecamp.com

Parent's Name _____ Camper's Name _____

(street) (city) (province / state) (postal code / zip) (country)

Date of Birth: Day Male Female Phone: Home _____
 Month Grade _____ Cell _____
 Year Height _____ Weight _____ Work _____

Parent's Email _____

Select Main Program Choice	4 – week options:	2 – week options:	6 – week options:	8 – week option:
General Camping <input type="checkbox"/>	July 1 – July 28 <input type="radio"/>	July 1 – July 14 <input type="radio"/>	July 1 – Aug. 11 <input type="radio"/>	July 1 – Aug. 25 <input type="radio"/>
Gymnastics <input type="checkbox"/>		July 15 – July 28 <input type="radio"/>		
Trampoline <input type="checkbox"/>	July 29 – Aug. 25 <input type="radio"/>	July 29 – Aug. 11 <input type="radio"/>	July 15 – Aug. 25 <input type="radio"/>	
Water Skiing <input type="checkbox"/>		Aug. 12 – Aug. 25 <input type="radio"/>		
Silks <input type="checkbox"/>				

TERMS AND CONDITIONS: A deposit per camper of \$750 will be charged to your credit card upon receipt of this application.

Balance after deposit: \$2049 (2 weeks); \$4245 (4 weeks); \$6270 (6 weeks); \$8400 (8 weeks). All fees are in Canadian Currency, and refundable in full until **April 15, 2019**.

Our Camp fee includes everything except transportation, applicable government taxes, tuck shop and t-shirt deposits.

Parent's Signature _____ Date _____

Please charge my deposit now (and the balance on May 1, 2019) to my: Visa MasterCard

Card Number _____ Exp Date _____ Name on Card _____

Verification Code _____

Print and Submit by Fax or Email