



Township of Algonquin Highlands

1051 Main Street, Box 99 • Dorset, ON P0A 1E0 • Tel: (705)766-9968 • Fax: (705) 766-9688

DORSET DAY CAMP - 2019 REGISTRATION FORM

Child's Name: _____

Child's Birthdate: _____

Parent/Guardian Names: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____ Cottage Phone: _____

Mailing Address: _____

Cottage Address: _____

Email Address: _____

Emergency Contact Name: _____

Relationship to Child: _____

Home Phone: _____ Work Phone: _____

Allergies: _____

Medical Conditions: _____

Medications: _____

Special Needs: _____

Fill in the days you would like your child to attend camp on the chart to the right, by inserting:

(M) Morning half day
(A) Afternoon half day
(F) Full day

10% Sibling discount.

Weeks of Camp	Days Attending					For Office Use Only
	Mon.	Tue.	Wed.	Thur.	Fri.	
July 2 - 5, 2019						
July 8 - 12, 2019						
July 15 - 19, 2019						
July 22 - 26, 2019						
July 29 - August 2, 2019						
August 6 - 9, 2019						
August 12 - 16, 2019						
August 19 - 23, 2019						

Cancellation Policy – 60% with more than 7 days' notice, 40% with less than 7 days' notice.

Half Day (8:30 - 12:30)	Half Day (12:30 - 4:30)	Daily	Weekly
\$ 15.41	\$ 15.41	\$ 21.84	\$ 98.28

Please note weekly is 5 consecutive days.

I, _____ hereby give permission for _____ to actively participate in the full range of programs and activities provided by the Algonquin Highlands Recreation Department. I authorize the Recreation Coordinator and his/her staff, in the event of an accident, injury or illness affecting the above named child, to authorize on my behalf all medical and other procedures, including admission to hospital and all other necessary treatment, as he/she may deem essential for the care and well-being of the said child. Such action is to be taken only when immediate contact with the undersigned cannot be made. I also agree to hold harmless the Township of Algonquin Highlands, its principals, representatives and employees from all claims for any and all injuries sustained while the above named child is participating in activities at any of the Township of Algonquin Highlands facilities I have received a copy of the parent handbook and will review the policies as outlined within.

Parent/Guardian Signature: _____ Date: _____