



Summer Camp Enrollment Form

STUDENT NAME(S) AND AGE(S): _____

PARENT/GUARDIAN NAME: _____

CIRCLE YOUR CHOSEN CAMP TYPE(S): Academic & Enrichment / Junior Readers

CIRCLE YOUR CHOSEN CAMP WEEK(S):

July 4 th -8 th	July 11 th -15 th	July 18 th -22 nd	July 25 th -29 th	August 2 nd -5 th
August 8 th -12 th	August 15 th -19 th	August 22 nd -26 th	Aug 29 th -Sept 2 nd	

CIRCLE YOUR CHOSEN CAMP DURATION:

Full Day - \$345 + HST / Half Day (Mornings) - \$225 + HST / Half Day (Afternoons) - \$200 + HST

EXTENDED BEFORE/AFTER CASE REQUIRED (\$10/day): ☐ YES ☐ NO

If yes, total days required: _____

Please Circle: M / T / W / TH / F

To BE COMPLETED BY CENTRE STAFF

PAYMENT INFORMATION (payment is due in full upon registration)

Participant's Name: _____

Total Payable: \$ _____

☐ Master Card ☐ Visa ☐ AMEX ☐ CHEQUE (payable to Sylvan Learning)

Card Number: _____

Expiry Date (MM/YYYY): _____

CVC: _____

Name on Card: _____

Cardholder Signature: _____

Payment Processed By: _____ Date: _____

(Centre Staff Signature)

Summer Camp Registration Form

To be completed and submitted prior to the first day of camp



PARTICIPANT INFORMATION

Participant Name(s): _____

Birthdate(s) (MM/DD/YYYY): _____

PARENT/GUARDIAN #1:

Last Name: _____

First Name: _____

Home Phone: _____

Business Phone: _____

Cell Phone: _____

Email: _____

PARENT/GUARDIAN #2:

Last Name: _____

First Name: _____

Home Phone: _____

Business Phone: _____

Cell Phone: _____

Email: _____

MAILING ADDRESS:

Street: _____

City: _____

Province: _____

Postal Code: _____

EMERGENCY CONTACT:

Name: _____

Relationship to Participant: _____

Home Phone: _____

Cell Phone: _____

Business Phone: _____

MEDICAL INFORMATION

Primary Physician: _____

Phone: _____

Are there any **medical conditions** we should be made aware of or **medications** that need to be administered during camp times? _____

PERSON'S AUTHORIZED TO PICK UP YOUR CHILD

In addition to parents/guardians, and the mentioned Emergency Contact, please list the names of any others who can pick up your participant (nanny, grandparents, neighbours, etc.).

PLEASE NOTE: AUTHORIZED PERSON MUST BE AT LEAST 16 YEARS OLD AND BE ABLE TO SHOW SYLVAN STAFF GOVERNMENT ISSUED IDENTIFICATION BEFORE YOUR CHILD WILL BE RELEASED FROM OUR CARE.



TERMS & CONDITIONS, WAIVERS AND CONSENT

_____ **Refund Policy:** Sylvan camp registration fees are non transferrable. Any requests for refunds must be made in writing or by email under the following terms: refunds for camp cancellation requests received more than 30 days prior to the first day of camp will be subject to a \$50 administration fee per paid week of camp. Refunds for camp cancellation requests received between 15-29 days prior to the first day of camp will be subject to a \$50 administration fee and a \$50 cancellation fee per week of camp. Camp cancellation requests received within 14 days of camp start date are non-refundable unless a medical certificate accompanies the request. We will try to accommodate requests to have your camp registration transferred to another date if possible. Refunds will not be granted for days of camp not attended. Sylvan Learning will do everything possible to avoid program cancellations; however, we reserve the right to cancel a session of camp if minimum enrollment is not met or if faced with unforeseen circumstances. In these cases, we will accommodate your child in an alternate program/ week or provide you a full refund at your discretion.

_____ **Media Waiver:** I hereby authorize the inclusion of my child in camp photographs and video and understand that this media may be used on Sylvan Learning websites, social media, and other sites related to local Sylvan camp and program activities. Photos and videos may also be taken for print or online promotional purposes. Participants will not be identified without parental consent.

_____ **Camp Preparation, Health & Safety and Medical Waiver:** Camp participants should arrive at the stated times. Extended care of 30 mins before and after each scheduled camp time is available for an additional fee of \$10 per day. This must be booked and paid for in advance. Pick up beyond 30 minutes will be charged at an additional \$15 per 15-minute block of time; we reserve the right to request that you withdraw your child from the remainder of the camp if lateness is consistent.

Camp participants should come prepared for the day or half day. Campers should have sufficient snacks/lunches packed each day as Sylvan cannot provide these. Please also be aware that our facility is completely nut free. Be sure to notify us in advance if your child has any allergies or health issues that we should be aware of.

No special clothing or equipment is required for the Sylvan camps. We ask that students do not bring any toys/electronic devices that may be broken or misplaced. We will provide all necessary equipment.

Sylvan camps are held indoors at our purpose-built educational facilities, however, weather permitting and at the discretion of the Camp Director, we may take campers outside for a short period to enjoy their lunch/snack in a green space within the property. This is an additional reason to notify us of any allergies to insects, grass or pollen.

I, the undersigned, hereby authorize Sylvan Learning or anyone acting on its behalf, to acquire necessary medical aid that may be required as a result of any accident or injury sustained by my child. I hereby indemnify and save harmless Sylvan from any and all actions, claims and demands for damages, loss or injury, however arising, which hereafter may have been sustained by my child while participating in the Sylvan Learning Summer Camps.

_____ **Privacy Policy:** Personal information collected as part of enrollment into a Sylvan Summer Camp will be held solely by Sylvan Learning and the local Sylvan Franchisee (Active Academics Ltd) at the location your child attends. Your personal information will not be shared with any other party, unless required by law. The information will be used prior and during the camp for communication, operational, safety and emergency purposes. As Parents/Guardians of camp participants and enrolled Sylvan students, we would also like to correspond with you in the future about relevant educational parent tips and resources as well as Sylvan programs and promotions. In accordance with Canadian privacy regulations please confirm your consent for us to communicate with you by email as indicated below.

STAY CONNECTED - STAY INFORMED

The Government of Canada's Anti-Spam Legislation (CASL) Sylvan requires your express consent for us to send you information electronically. By checking 'yes', you will continue to receive information from Sylvan by email as described above. You can unsubscribe from Sylvan email communication at any time in the future and your email address will automatically be removed from our distribution list.

☐ Yes, keep me connected ☐ No, I do not wish to be communicated with by email

I have read and agree to the above terms and conditions:

Parent/Guardian Signature

Date (DD/MM/YY)

***Please return the completed Registration form and Terms and Conditions to Sylvan prior to the first day of camp. Completed forms can be scanned and emailed to your local centre or handed in directly to one of our Centre staff.**

Please email completed forms to the appropriate Sylvan location:

Oakville@Sylvan2Learn.com Burlington@Sylvan2Learn.com Hamilton@Sylvan2Learn.com