



NATURE NUTS SUMMER CAMP REGISTRATION FORM Ages 7 to 11

CAMPER INFORMATION						
Camper Name:		Date of Birth: (mm/dd/yy)				
Health Card #:		Doctor's Name:				
PRIMARY CONTACT INFORMATION						
Primary Contact Name:						
Address:						
City:		Postal Code:				
Phone:	Cell:	Email:				
MEDICAL INFORMATION						

Are there any concerns (medical, physical, behavioural/social, educational, accessibility, etc.) that we may assist with in the camper's adjustment to camp? If yes, please specify.

Does your camper have any allergies that you would like us to be aware of? Does the camper carry an epi-pen? If yes, please specify.

Additional information

EMERGENCY CONTACT INFORMATION (must be different than primary contact with Permission to Pick-Up Child)

Name(s):

Relationship:

Phone/Cell:

Phone/Cell:

Phone/Cell:

HOW DID YOU HEAR ABOUT NATURE NUTS CAMPS?

CAMP & EXTENDED CARE FEES

CAMP FEE: \$235 per week per child

EXTENDED CARE: Morning and/or Afternoon Extended Care Available (Supervised Free Play) \$30 per day or \$15 for morning or afternoon only.

PLEASE NOTE: Extended Care MORNING Drop-off starts at 7:45 am and AFTERNOON pick-up ends at 5:00 pm (Regular camp hours are: 8:45 am to 4:00 pm).

WEEKLY CAM	P FEE:				\$235.00		
EXTENDED CA	RE NEEDS:						
MON	TUE	WED	THU	FRI			
		Ap	oply same extended	care for			
	ΓΙΟΝ						
Wk 2: St	rviving the Elemen	ts, Part 1 (Jul 8-12)					
Wk 3: Ar	Vk 3: Are You Game? (Jul 15-19)						
Wk 4: Al	Wk 4: All Creatures Great and Small (Jul 22-26)						
Wk 5: M	Wk 5: Mad Scientist (Jul 29-Aug 2)						
Wk 6: Cr	Wk 6: Crafty by Nature (Aug 12-16)						
Wk 7: St	urviving the Elemen	ts, Part 2 (Aug 19-23))				
Wk 8: Be	est of Camp (Aug 2	6-30)			TOTAL		
PAYMENT INF	ORMATION		NOTE	: full payment is requi	red at time of registration		
Payment Metho	d:						

Card #

I authorize Ganaraska Region Conservation Authority to debit my card in the amount of

Name on Card:

CANCELLATION AND REFUND POLICY*

The Nature Nuts Camp registration fee must be paid in full at time of enrollment. Please note that \$50 of the registration fee (per week camp) is non-refundable, barring medical issues (see below) or cancellation of camp by the Ganaraska Region Conservation Authority (GRCA) due to low registration.

In the case of a medical emergency, the request for a refund must be made in writing with documentation from your child's physician and will be dealt with on a case-by-case basis.

If a cancellation occurs 15-30 days prior to start date of Camp, a refund will be issued minus \$50 (as noted above). If a cancellation occurs 2 weeks prior to start date of Camp, no refund will be issued.

Expiry:

CV Code:

Signature:

LATE FEE CHARGE*

If a child is not picked up on time at the end of each camp day, there will be a \$15 extended care fee for every 15 minutes late.

TERMINATION OF SERVICES*

The Ganaraska Region Conservation Authority hereby retains the right, at its sole discretion and at any juncture, to refuse or cease provision of its services, whether temporarily or permanently. This action may occur if a camper engages in disruptive behavior, physically or verbally assault another camper or staff member, or demonstrate non-compliance with directives from camp personnel. In the event of such circumstances, the camper shall be instructed to vacate the camp premises, and no reimbursement shall be extended to the parent or guardian.

CONSENT AND WAIVER*

While my child attends Nature Nuts Camps, I understand that there are risks involved in participating in an activity or program and assume all responsibility for any injury, death, loss or damage, which he/she might suffer in connection with their participation in camp programs,

In addition, I, for myself, my child, any of my personal representatives, heirs, or successors, release and discharge Ganaraska Region Conservation Authority, its directors, officers and employees and their respective agents, officials, servants, and representatives from any and all claims and action, occurrence, accident, loss, damage, injury, cost, expense, fees, charges, fines, penalties or other amount that, directly or indirectly, is, or is alleged, to be caused by, contributed to or results or arises from (in whole or in part, regardless of any other cause or event contributing concurrently or in any sequence and notwithstanding any continuous or repeated exposure to) COVID-19 or other contagious, infectious or communicable disease, illnesses or viruses, or the fear or threat thereof, I may ever have in connection with the above event, and waive all my rights thereto.

I acknowledge having read, understand and agree to all of the above *terms and conditions.

Signature (Parent/Guardian):

PHOTO WAIVER

I hereby give Ganaraska Region Conservation Authority the right and permission to publish/broadcast, without charge, photographs/images/videos taken of the above listed participant during his or her participation in Nature Nuts Camps. These photographs/images/videos may be used in publication, including electronic publications during TV broadcast or in audiovisual presentations, promotional literature, and advertising or in other ways. This material remains the property of the GRCA.

I acknowledge having read, understand and agree to all of the above photo waiver terms and conditions.

Signature (Parent/Guardian):

* In the event the SUBMIT FORM button does not work, please save file (use camper's full name) and submit via email at info@grca.on.ca

	ADMINISTRATIVE USE ONLY
Date Received:	Receipt No.:
O Provided NN Checklist	Registration Processed by:

Ganaraska Region Conservation Authority 2216 County Road 28, Port Hope, ON L1A 3V8 905.885.8173 info@grca.on.ca