

Carrie Whalen's 26th Annual Y.A.K. March Break

2020 Registration Form

Young Artists of Kingston, 716 King St. West, K7M 2G2,
613 539 5774, yakcamps@mac.com

Office Use Only
PAID: _____
DATE: _____
Confirmation Sent.: _____

Please print and fill out **one application form per camper:**

Child's Name: _____ Goes By: _____
 Sex: _____ Age: _____ Birth Date: _____
 Is this the first time your child has partaken in a Y.A.K. Camp? _____
 Health Card #: _____

Allergies, Medical Conditions, or behavior problems (We must be notified if your child has Autism, ADD etc.)

Parent A: _____ Occupation: _____

Home Phone: _____, Work #: _____ Ext: _____ Cell: _____

Mailing Address _____ Postal Code: _____

*We do camp confirmations via e-mail so it is important that you provide an e-mail address written **CLEARLY***

E-Mail: _____

Parent B: _____ Occupation: _____

Home Phone: _____, Work #: _____ Ext: _____ Cell: _____

E-Mail: _____

Please circle what your child is interested in (you can circle multiple)

Art Based / Lego Robotics / Both

Please Circle the Dates that you're registering for:

Monday March 16	Tuesday March 17	Wednesday March 18	Thursday March 19	Friday March 20
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Extended hours

8-9a.m. @ \$8. per hour= \$ _____ List which days
 4-5p.m. @ \$8. per hour=\$ _____ List which days

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Photos

If you do not want photos of your child used in our advertising you must attach a letter stating so with a current photo of your child so that we will be able to recognize him/her when we are putting together our ads.

Camp Fee \$ _____
Extended Hrs. (\$8. per hr./day) 8-9 a.m. \$ _____
(\$8. per hr./day) 4-5 p.m. \$ _____

Sub-Total \$ _____
Tax (13% HST) \$ _____

Total Price \$ _____

All cheques must be made payable to Carrie Whalen.

After March 5th all payment must be made in person with cash.

Please make sure that you read the website to see where your camp is located before you bring him/her to camp as we have more than one location for our camps.

Camper Release Form

I, _____ as the parent/guardian of _____ permit my child to participate in Carrie Whalen's Y.A.K. Camps activities under the supervision of the camp instructors, and hereby release Carrie Whalen & Y.A.K Camp, its directors, instructors, volunteers and/or affiliates from any claim or action of any kind for damages, loss or injury, excepting those caused by neglect, which may occur as a result of my child's participation. I agree that Carrie Whalen or camp staff may seek immediate medical attention for any injury which my child may incur during the course of the camp session(s).

I have also read the Y.A.K. Camp registration information. I agree with all policies and have addressed the director with any concerns I have. I have also gone over all relevant information with my camper.

Signature of Parent or Guardian