

**Farm & Circus Week Summer Camp Registration**

**Date: July 15 to July 19 - 2019, 9am to 4pm**

**1 Registration - $235 incl. H.S.T. per child - 2 registrations: $ 225 incl. H.S.T. per child**

**Before (8am to 9am) & aftercare (4pm to 6pm) available for $8 incl. H.S.T. per hour**

***Please note: Registration and full payment must be received by February 28***

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Student 1 - Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_\_\_\_ Age: \_\_\_

Physical Limitations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Health Card No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Student 2 - Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_\_\_\_\_ Age: \_\_\_

Physical Limitations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Health Card No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Code: \_\_\_\_\_\_\_\_\_

Telephone # Home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you know about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**PAYMENT**

Student 1 - $235**…………………………………………………………….$ 235.00**

Student 2 - $225…………………………………………………………….$ \_\_\_\_\_\_\_

After hours care Weekdays and times: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@ CAD 8.00 per hour: $\_\_\_\_\_\_\_\_

**TOTAL AMOUNT (H.S.T. included)……………………………………..** **$\_\_\_\_\_\_\_\_**

**Please send cheque (made out to Tours & Events Unlimited Inc.) to:**

**Farm Ayr, 3431 Cedar Creek Road, Ayr ON, N0B1**

**PLEASE READ AND SIGN THE FOLLOWING INDEMNITY CLAUSE**

I hereby assume all of the risks arising out of, incidental to, or in any other way connected with my or my child’s participation in the summer camp provided by Tours & Events Unlimited Inc. T/A Farm Ayr and its teachers or agents, including but not limited to any risks which are not foreseeable.

I hereby release Farm Ayr and all its officers, directors, employees, including teachers and supervisors from any and all liability and any and all claims arising out of, incidental to or any way connected with my child’s participation in any lessons and performances. I (we) consent to the participation of my child named below in the summer camp. I (we) make the acknowledgements, assume the risks and responsibilities and release Farm Ayr and teachers in accordance with this release, acknowledgement and the assumption of risk for and on behalf of myself and the child named below.

I hereby authorize Farm Ayr to publish photographs and/or videos taken of myself

and/ or the minor child or children participating in the camp. These pictures may be used

by Farm Ayr as promotional material, i.e. online videos, brochures and other publications.

I hereby grant permission to contact emergency services should the need arise. I hereby acknowledge the terms and conditions and the rules and regulations stated in this form and will adhere to them.

Name of Parent: (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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