



Brock University

2008 SUMMER CAMP REGISTRATION

PARENT'S/GUARDIAN'S LAST NAME		FIRST NAME	
HOME ADDRESS		CITY	POSTAL CODE
HOME PHONE NUMBER	DAYTIME PHONE NUMBER	CELL PHONE NUMBER	
ALTERNATE CONTACT PERSON: FIRST NAME		LAST NAME	
ALTERNATE'S HOME PHONE NUMBER	ALTERNATE'S DAYTIME PHONE NUMBER	ALTERNATE'S CELL PHONE NUMBER	
CAMPER'S LAST NAME	FIRST NAME	SEX <input type="checkbox"/> M <input type="checkbox"/> F	BIRTHDATE (MM/DD/YY)
MEDICAL ALERT (Please list any conditions and/or information we should be aware of (i.e. Asthma, drug/food allergies, medications, disabilities, etc))			

** PLEASE NOTE: FOR SPORTS SCHOOL – CHILDREN MUST BE 6 YEARS OF AGE (OR OLDER) AT TIME OF REGISTERED SESSION

CAMP	DATE	COST	EXTENDED CARE \$20/WEEK	TOTAL
One-Week Sessions				
(Before: 8:00-8:30 am)(After: 4-5pm) <small>(Total cost for extended care is \$20 whether enrolled in Before or After or Both)</small>				
<input type="checkbox"/> Week 1 SPORTS SCHOOL (6-14 yrs)	Mon. June 30 - Fri. July 04	\$140	\$125 (Additional Children or Weeks) <input type="checkbox"/> Before <input type="checkbox"/> After	\$ _____
<input type="checkbox"/> Week 2 SPORTS SCHOOL (6-14 yrs)	Mon. July 07 – Fri. July 11	\$140	\$125 (Additional Children or Weeks) <input type="checkbox"/> Before <input type="checkbox"/> After	\$ _____
<input type="checkbox"/> Week 3 SPORTS SCHOOL (6-14 yrs)	Mon. July 14 – Fri. July 18	\$140	\$125 (Additional Children or Weeks) <input type="checkbox"/> Before <input type="checkbox"/> After	\$ _____
<input type="checkbox"/> Week 4 SPORTS SCHOOL (6-14 yrs)	Mon. July 21 – Fri. July 25	\$140	\$125 (Additional Children or Weeks) <input type="checkbox"/> Before <input type="checkbox"/> After	\$ _____
**Additional SPORTS SCHOOL Shirt: Size YXL <input type="checkbox"/> Adult Sm <input type="checkbox"/> Med <input type="checkbox"/> Lg <input type="checkbox"/> (\$10 each) or Hat <input type="checkbox"/> \$7 each or Combo Pkg: Shirt + Hat <input type="checkbox"/> \$15 \$ _____				
<input type="checkbox"/> BOY'S BASKETBALL CAMP (9-17 yrs)	Mon. July 28 – Fri. Aug. 01	\$205	\$165 (2 nd child or week) No Pre/After Care	\$ _____
<input type="checkbox"/> BOY'S BASKETBALL CAMP (9-17 yrs)	Mon. Aug. 04 – Fri. Aug. 08	\$205	\$165 (2 nd child or week) No Pre/After Care	\$ _____
<input type="checkbox"/> GIRL'S BASKETBALL CAMP (8-16 yrs)	Mon. Aug. 11 – Fri. Aug. 15	\$160	No Pre/After Care	\$ _____
<input type="checkbox"/> SOCCER CAMP (8-16 yrs)	Mon. Aug. 25 – Fri. Aug. 29	\$150	<input type="checkbox"/> Before <input type="checkbox"/> After	\$ _____
<input type="checkbox"/> VOLLEYBALL CAMP (10-17 yrs)	Mon. Aug. 18 – Fri. Aug. 22	\$150	<input type="checkbox"/> Before <input type="checkbox"/> After	\$ _____
<input type="checkbox"/> BOYS/GIRLS HOCKEY INTRO CAMP (5+ yrs)	Mon. Aug. 18 – Fri. Aug. 22	\$135	<input type="checkbox"/> FWD <input type="checkbox"/> DEF <input type="checkbox"/> GOAL	\$ _____
<input type="checkbox"/> GIRLS CONDITIONING CAMP (11+ yrs)	Mon. Aug. 25 – Fri. Aug. 29	\$140	<input type="checkbox"/> FWD <input type="checkbox"/> DEF <input type="checkbox"/> GOAL	\$ _____
<input type="checkbox"/> GIRLS INTRO HOCKEY (6-14 yrs)	Mon. Aug. 25 – Fri. Aug. 29	\$135	<input type="checkbox"/> FWD <input type="checkbox"/> DEF <input type="checkbox"/> GOAL	\$ _____
<input type="checkbox"/> BOYS/GIRLS AUGUST HOCKEY CAMP (7-12 yrs)	Mon. Aug. 18 – Fri. Aug. 22	\$200	<input type="checkbox"/> FWD <input type="checkbox"/> DEF <input type="checkbox"/> GOAL	\$ _____
<input type="checkbox"/> BOYS/GIRLS ELITE DEFENCEMAN CAMP (9-12 yrs)	Mon. Aug. 25 – Fri. Aug. 29	\$230	<input type="checkbox"/> FWD <input type="checkbox"/> DEF <input type="checkbox"/> GOAL	\$ _____
TOTAL AMOUNT DUE All prices include GST (#R118819531):				\$ _____

PAYMENT INFORMATION – PLEASE PRINT CLEARLY	
<input type="checkbox"/> VISA	CARDHOLDER'S NAME: _____
<input type="checkbox"/> MASTERCARD	CARD #: _____ EXP. DATE: _____
	CARDHOLDER'S SIGNATURE: _____
<input type="checkbox"/> CHEQUE ENCLOSED (Made payable to "Brock University")	

Receipts/Information will be mailed out within 2 weeks of registration when registering by phone or mail. Call if you do not receive. *Please complete the form on back.

3 OPTIONS TO REGISTER:

- Phone-in:** Call (905) 688-5550, ext. 4060 (Payment accepted by Visa or Mastercard)
- Walk-in:** Visit the Welcome Desk in the Walker Complex (Payment accepted by Cash, Cheque, Debit Card, Visa or Mastercard)
- Mail-in:** Complete the above form in full and mail to: (Payment by cheque or credit card only)

Brock University, Dept. of Athletics, 500 Glenridge Ave., St. Catharines, ON L2S 3A1 Att: Summer Camp Registration