



**Plunge! Aquatic Centre Summer Camp  
Camper Registration Form**

220 Mountain Drive, Collingwood, Ontario L9Y 3Z2 705-444-8705(p) 705-445-7803(f)  
[info@plungebluemountain.ca](mailto:info@plungebluemountain.ca) [www.plungebluemountain.ca](http://www.plungebluemountain.ca)

Registration will not be processed without signature(s) by Parent(s)/Guardian(s) on the Authorized Release & Acknowledgment on the reverse side of this form, which contains important policies and procedures. Please note registrations are on a first come first served basis and are not confirmed until you have received a confirmation by email.

**Family Name:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**Home Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_  
**Parent/Guardian#1 Name:** \_\_\_\_\_ **Work/Chalet:** \_\_\_\_\_ **Cell:** \_\_\_\_\_  
**Parent/Guardian #2 Name:** \_\_\_\_\_ **Work/Chalet:** \_\_\_\_\_ **Cell:** \_\_\_\_\_  
**Secondary Contact in case of emergency:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Camper #1 Name:** \_\_\_\_\_  
Male/Female  
**Date of Birth (d/m/y)** \_\_\_\_\_ **Age at time of camp (must be between the ages of 4 and 5 years):** \_\_\_\_\_  
**Heath Card Number:** \_\_\_\_\_  
**Medical/Emotional/Social/Psychological Needs:**  
\_\_\_\_\_

**Dates:** \_\_\_\_\_  
**Camper Total (\$220 + \$ 11GST= \$231.00/week or \$44 + \$2.20GST = \$46.20 /day):** \$ \_\_\_\_\_

**Camper #2 Name:** \_\_\_\_\_  
Male/Female  
**Date of Birth (d/m/y)** \_\_\_\_\_ **Age at time of camp (must be between the ages of 4 and 5 years):** \_\_\_\_\_  
**Heath Card Number:** \_\_\_\_\_  
**Medical/Emotional/Social/Psychological Needs:**  
\_\_\_\_\_

**Dates:** \_\_\_\_\_  
**Camper Total (\$220 + \$ 11GST=\$231.00/week or \$44 + \$2.20GST = \$46.20 /day):** \$ \_\_\_\_\_

**Family Total:** \$ \_\_\_\_\_

**Payment Options (please circle) VISA/ MASTERCARD/ AMERICAN EXPRESS/ CASH**  
**Card Number:** \_\_\_\_\_ **Expiry Date:** \_\_\_\_\_  
**Name on Card:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**For Office Use Only**  
**Payment Received By:** \_\_\_\_\_  
**Chit #** \_\_\_\_\_  
**Entered in Jonas By:** \_\_\_\_\_



**Plunge! Summer Camp Authorization, Release and Acknowledgement  
Must be completed in full and accompany registration form**

The undersigned:

**Medical Treatment/Emergency**

Authorizes Plunge! Aquatic Centre in the event of an emergency to use its reasonable discretion, on behalf of the undersigned, the undersigned's children or associated spectator(s) participating in or attending one or more of Plunge!'s current or future programs, in rendering first aid treatment or arranging for emergency medical care (including hospitalization), at the expense of the undersigned;

**Release**

Releases Plunge! Aquatic Centre from all claims and liabilities whatsoever arising from participation in or attendance at one of more of Plunge!'s current or future programs by the undersigned, the undersigned's child(ren) or any associated spectator(s);

**Missed Camp Policy**

Understands NO make up days or other financial credit/refund will be available in connection with missed camp time (other than of course if cancellation of the lesson is initiated by Plunge! for a closure beyond their control and in such case a full refund will be issued). When two weeks notice is given by the parent(s) or guardian(s) the registration fee may be moved to a different session within the same summer. This transfer of funds is dependant on availability within the week requested. These funds may not be transferred from year to year and are not transferable to any other service offered by Plunge! Aquatic Centre. A \$25 fee will apply for this transfer;

**Camp Confirmation**

Understands registration is taken on a first come first serve basis. Campers will not be confirmed until registration and payment is completed in full. Once a camper registration is confirmed an email confirmation will be sent to the email address provided on the Camper Registration Form. Along with the confirmation a list of items the camper is required to bring each day will be listed.

**Publicity**

Consents to the use by Plunge! of each students likeness for publicity purposes;

**Termination of Participant**

The Managers of Plunge! Aquatic Centre reserve the right to terminate the registration of any participant(s) if, in their sole discretion, the Managers, determine such termination to be in the best interest of the participant or the program;

_____	_____
Print Name of Camper #1	Print Name of Camper #2
_____	_____
Print Name of Parent(s)/Guardian(s)	Print Name of Parent(s)/Guardian(s)
_____	_____
Signature of Parent(s)/Guardian(s)	Signature of Parent(s)/Guardian(s)
_____	_____
Date	Date