

REGISTRATION FORM

PLEASE NOTE Make all cheques payable to Camp Menesetung
All fees are due at time of registration Register by mail only
All registrations must be received 10 days prior to camp

Camper's Name: (Please Print) _____

Gender: F () M () Date of Birth: _____

Camp Session Dates Start: _____ to: _____

Method of Payment (Please no cash) & Amount _____

Parent/Guardians Names _____

Mailing Address: _____

Phone: Home _____ Mobile _____

Business Phone _____

Email Address _____

Speciality Camp Choice _____

Church Affiliation (if applicable) _____

Cabin mate request (one only please) _____

Speciality Choice: _____

T-Shirt: Size: ___ Youth Med. ___ Youth Large ___

Adult Small ___ Adult. Med. ___ Adult Large ___ Adult XL ___

I HAVE READ AND UNDERSTAND ALL OF THE REGISTRATION INFORMATION AND
CONDITIONS OF ENROLLMENT.

Parent/Guardians Signature _____

Today's Date _____

The use, retention and disclosure of personal information collected from this form is done '11 compliance with privacy legislation including, but not limited to, the Personal Information Protection and Electronic Documents Act. (2000. cs).