

140 Brooke Street, Thornhill, Ontario L4J 1Y9 (905) 889-4543

## **Summer Camp Registration Form – Returning Families**

Child's Name:			Date:		
<u>SESSIONS</u>			NURSERY SESSION OPTIONS		
Session 1 Session 5			Full Day (9am-4pm)		
			Half Day	y (9am-12pm)	
Session 2		Session 6	KINDERGARTEN SESSION OPTIONS		
			Full Day (9am-4pm)		
Session 3		Session 7		BEFORE AND AFTER CARE OPTIONS	<u>3</u>
Session 4		Session 8	Before	Care (8am-9am)	
Jessi011 4	0000.01.0		After Care (4pm-6pm)		
<u>Form</u>				<u>Signature</u>	
Registration Form					
Parental Acknowledgment Form					
Field Trips/Special Events					
Multi Media Consent					
Anaphylactic Food Allergies					
Immunization Record					
Over the	e Cou	unter			
With the above signatu	ures,	I authorize Thornhil	Nursery S	School to carry forward the above forn	ns for the
duration of my child's	enrolr	ment at TNS&K.			
Please indicate any	y cha	nges to original	Forms:		
Rotessa Direct Paym	nent	<u>Terms</u>		Deposit (non-refundable a	and
				currently dated applied to	last
Total Outstanding	(inc fees)	\$		session of camp) made pa	ayable b
Date of Balance		June 1st, 20_		Cheque	
be deduc	tea	<u> </u>		Rotessa	
				Signature	
For Office Use Only	<b>y</b>				
Start Date:			<b>F</b> <sub>to a</sub> l	Data	
Start Date:			Ena	Date:	
Deposit Paid: \$					