



Camp Registration Form

Please use a separate form for each participant and each camp. Please print clearly!

Name of Camp: _____

Start Date: _____ End Date: _____ Attended previous Queen's Camp: Y N

Program Price: _____ **Form will not be processed without payment.** Cheque Cash Debit (circle one)

Mastercard # _____ Expiry Date: _____

VISA # _____ Expiry Date: _____

Name of Participant: _____ Gender: M F

Age: _____ Birthdate: _____ Grade: _____ Swim Level: _____
(as of camp start date) Day Month Year (at time of registration)

Address: _____
No. Street Apt.# City Province Postal Code

General Contact: _____
Name Relationship Daytime Phone Number Email

In Case of Emergency: _____
First Contact Name Daytime Phone Number

Secondary Contact: _____
Alternate Person's Name Daytime Phone Number

Health Card #: _____ Family Doctor: _____
Mandatory

Family Dentist: _____

Additional Health Information: _____
(Please include allergies, recent injuries, medications, etc.)

I, the undersigned, the parent/guardian of the above named child, do hereby consent to this child's participation in the above mentioned camp. I acknowledge that participation in this program involves the possibility of injury. I am aware of no physical, or other reasons, why this child should not participate in this program. I hereby agree to waive and release any and all rights against Queen's University, its employees and agents, for any and all causes of action that may arise other than by the negligence of Queen's University, its employees and agents, as a result of participation in this program.

Parent/Guardian Signature _____

From time to time we take pictures of your child at camp and we require your permission to use these pictures in publications or on the web: yes no

SPORTS CAMP ONLY - must be 8 years old by first day of camp session!

1. _____ 2. _____ 3. _____

You may list friends you would like to be grouped with. We will try to accommodate your requests, however there is no guarantee that we will be able to do so. Please request in advance to eliminate a hassle on the first day of camp for everyone.

The personal information we collect from you on this form is used for the following purposes: confirmation of eligibility to participate; payment of fees; registration purposes; assumption by individual of stated risks; waiver of stated rights against the university; health or emergencies during participation. Once payment is confirmed, the information is held for one year after the date on the registration form, and is protected from misuse by appropriate security measures. By signing this form you are consenting to your information being used for the above stated purposes.

Send To:
Golden Gaels Sports Camps, Physical Education Centre, Queen's University, Kingston, ON, K7L 3N6
Drop off at P.E.C. on Union St.; or FAX: 533-6478 (Only if using credit card to make payment.)