

**2021 CVTC Summer day camps Registration**

**(June 28th – Aug 27th)**

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age: \_\_\_\_\_\_\_\_\_\_\_\_\_

Membership receipt’s number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Level (experience): Beginner (0-2 yrs.) Intermediate (2-3 yrs.) Advanced (3yrs and more)

Parent’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Phone (direct contact) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Names of person(s) who is authorized to pick up children\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Allergies (if any) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MONDAY TO FRIDAY

 Full Day $325- 9am to 4pm

 Half Day $180- 9am to 12pm

 Half Day $180- 1pm to 4pm

Please select week(s):

 June 28th (4days- Holiday July 1st- Full $260/ Half $144)

 July 5th

 July 12th

 July 19th

 July 26th

 Aug 2nd (4days- Holiday Aug 2nd- Full $260/ Half $144)

 Aug 9th

 Aug 16th

 Aug 23rd

Cash/Cheque Payable to: Greg Uras

Etransfers – urasgregory@hotmail.ca

Forms along with payment can be emailed to Greg Uras at urasgregory@hotmail.ca or hand delivered directly to Greg at City View Tennis club.

Children are required to provide their own nut-free lunch and snack for camps. They are also required to bring their own athletic shoes, tennis racquet, reusable water bottle, hat and sunscreen. Friday is pizza day and it is included in the registration.

Parental consent: I understand that Greg Uras, City View Tennis club, its employees and management will undertake to provide a safe and secure environment for my child and his/her possessions. I am satisfied that the necessary precautions and procedures are in place to minimize any injury or loss. I will not hold the club, its employees and agents responsible in the event of any accident or loss. If, because of sudden illness or accident, medical treatment is necessary, I agree to allow to club to use its judgement and allow physicians to take emergency measures.

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_