

No. _____
 Date _____
 Fees _____

HILLCREST CAMP
 59 Plymbridge Rd., Toronto
 M2P 1A2

Ph. 416-489-8355
 Fax 416-489-7445

APPLICATION FOR SUMMER CAMP 2017

I hereby make application for the enrolment of the following child in the Hillcrest Summer Camp. I agree to abide by the rules and regulations of the school/camp and the resolutions and by-laws of its Board of Directors. No allowance can be made for absenteeism. I understand the school/camp is a non-profit organization operating mainly from tuition fees.

CHILD'S NAME _____ Male _____ Female _____

ADDRESS _____ POSTAL CODE _____

CITY _____ HOME PHONE () _____

AGE _____ BIRTHDATE _____

PARENT NAME _____ OCCUPATION _____ CELL. PHONE _____

PARENT NAME _____ OCCUPATION _____ CELL. PHONE _____

EMAIL ADDRESS: _____ / _____

SIBLING(S) NAME(S) _____ BIRTHDATE(S) _____

DATES:

SESSION 1 - MONDAY, JUNE 26th to FRIDAY, JULY 21st, 2017 4 WEEKS

SESSION 2 - MONDAY, JULY 24th to FRIDAY, AUGUST 4th, 2017 2 WEEKS

SESSION 3 - MONDAY AUGUST 7th to FRIDAY, AUGUST 18th, 2017 2 WEEKS

TIMES:

MORNING: 9:00 a.m. - 11:30 a.m. _____ (2012, 2013, 2014, 2015)

AFTERNOON: 1:00 p.m. - 3:30 p.m. _____ (2012, 2013, 2014, 2015)

3 / 4 DAY 9:00 am - 1:30 pm _____ (2014 only)

FULL DAY: 9:00 a.m. - 3:30 p.m. _____ (2012, 2013, 2014)

Please make cheques payable to "Hillcrest Camp"
*****DEPOSIT & BALANCE MUST BE INCLUDED WITH APPLICATION*****
FEES FOR ¾ DAY & FULL DAY PROGRAMS INCLUDE A HOT LUNCH

FEE SCHEDULE

***N.B. BALANCE WILL BE DEPOSITED ON MARCH 1st, 2017
 after which all fees are NON-REFUNDABLE (see attached note)***

| | 2 wks | 2 wks | 2wks | 4wks | 4wks | 4wks | 6wks | 6wks | 6wks | 8wks | 8wks | 8wks |
|-------------------------------|-------|---------|----------|---------|---------|----------|---------|---------|----------|---------|---------|----------|
| | ½ day | ¾ day | Full day | ½ day | ¾ day | Full day | ½ day | ¾ day | Full day | ½ day | ¾ day | Full day |
| TOTAL FEES | \$645 | \$1,090 | \$1,330 | \$1,290 | \$2,180 | \$2,655 | \$1,930 | \$3,270 | \$3,985 | \$2,575 | \$4,360 | \$5,310 |
| DEPOSIT (current date) | \$225 | \$335 | \$450 | \$450 | \$675 | \$900 | \$675 | \$1,000 | \$1,350 | \$900 | \$1,750 | \$1,800 |
| BALANCE (March 1/2017) | \$420 | \$755 | \$880 | \$840 | \$1,505 | \$1,755 | \$1,255 | \$2,270 | \$2,635 | \$1,675 | \$2,610 | \$3,510 |
| | | | | | | | | | | | | |

Please note that contact information including home address, home phone number & email address may be distributed to Hillcrest families upon request for the purpose of forming carpools only.

PARENT SIGNATURE: _____

DATE: _____