



## 2018 SPRING CAMPS

FOR INDIVIDUALS WITH VARIED ABILITIES

Unique and Interactive Experiences

**CAMP REGISTRATION: Please PRINT**

Camper's Name: \_\_\_\_\_  Male  Female  
First Name Last Name

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_  
DD MM YYYY

School Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone #: Home: (\_\_\_\_) \_\_\_\_\_  Work or  Cell: (\_\_\_\_) \_\_\_\_\_

Parent/Guardian Email Address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone #: Home: (\_\_\_\_) \_\_\_\_\_  Work or  Cell: (\_\_\_\_) \_\_\_\_\_

Camper's Medical Condition/Diagnosis: \_\_\_\_\_

Health Card #: \_\_\_\_\_ Mobility:  Independent Walking  Assisted  Wheelchair  
 Toileting:  Independent  Assisted  Total Care

How did you hear about Nova's Ark?  Agency  Family  Friend  School  Website

**CAMP SESSION SELECTION: Please check beside your choice(s)**

**Days: 2018 March Break Time: 9:00 a.m. to 3:00 p.m. Cost: \$130.00/day**

- Monday, March 12       Tuesday, March 13       Wednesday, March 14  
 Thursday, March 15       Friday, March 16

*(Note: Payment for ALL Camp Sessions are requested by February 16, 2018.)*

**If funding is available for your child's term at Nova's Ark, please show Agency information and attach a copy of the confirmation letter if available:**

Agency Name: \_\_\_\_\_ # of Weeks Funded: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone / Ext #: \_\_\_\_\_

**Office Use Only:**

**PAID BY:**  Cash  Cheque  eTransfer

**P/G:** Inv# \_\_\_\_\_ \$ \_\_\_\_\_ Date: Sent \_\_\_\_\_ Rec'd \_\_\_\_\_ Rec't#: \_\_\_\_\_

**AG:** Inv# \_\_\_\_\_ \$ \_\_\_\_\_ Date: Sent \_\_\_\_\_ Rec'd \_\_\_\_\_ Rec't#: \_\_\_\_\_