

### 2018 Fun in the Sun CAMP REGISTRATION FORM

Student First Name / Last Name	Date of birth DD/MM/YY	Grade level JK/SK/1,2,3,4 @ June 1 <sup>st</sup> , 2018
1-		
2-		
3-		

Select the week(s) attending	Theme	Cost per week	After Care 4-6 PM	# of Students participating	Total Due
Week 1 - July 9 to 13	<b>Space</b>	<input type="checkbox"/> \$295.00	<input type="checkbox"/> \$50.00	X	\$
Week 2 - July 16 to 20	<b>Science</b>	<input type="checkbox"/> \$295.00	<input type="checkbox"/> \$50.00	X	\$
Week 3 - July 23 to 27	<b>Super Heroes</b>	<input type="checkbox"/> \$295.00	<input type="checkbox"/> \$50.00	X	\$
Week 4 - July 30 to Aug. 3	<b>Winter</b>	<input type="checkbox"/> \$295.00	<input type="checkbox"/> \$50.00	X	\$
Week 5 - Aug. 7 -10 (4 days)	<b>Inventions</b>	<input type="checkbox"/> \$241.00	<input type="checkbox"/> \$40.00	X	\$
<b>Attending 5 Weeks</b>	<b>ALL</b>	<input type="checkbox"/> <b>\$1,421.00</b>	<input type="checkbox"/> <b>\$240.00</b>	<b>X</b>	<b>\$</b>
<b>SUBTOTAL</b>					<b>\$</b>
Deposit due with registration for current TRMS students <sup>**1</sup>			<input type="checkbox"/> <b>\$150.00</b>	X	- \$ .00
Deposit due with registration for non TRMS students <sup>**1</sup> Minimum of 1 week's fees is due			<input type="checkbox"/> <b>\$295.00</b> <input type="checkbox"/> <b>\$241.00</b>	X	- \$ .00
Balance of Fees due May 1 <sup>st</sup> , 2018					\$ .00

**\*\*1 - I AGREE TO PAY THE ABOVE NOTED 2018 CAMP FEES and I UNDERSTAND NO PORTION OF SUCH FEES PAID OR OUTSTANDING WILL BE REFUNDED OR CANCELLED IN THE EVENT OF ABSENCE OR WITHDRAWAL FROM THE TRMS 2018 SUMMER CAMP PROGRAM AFTER MAY 1<sup>ST</sup>, 2018. I UNDERSTAND THAT A \$150.00 ADMINISTRATION FEE WILL BE APPLIED TO ALL REGISTRATIONS CANCELLED PRIOR TO MAY 1<sup>ST</sup>, 2018. ALL FEES INCLUDE PIZZA LUNCH FRIDAYS AND FIELD TRIPS.**

Signature of Parent/ Guardian \_\_\_\_\_ Dated \_\_\_\_ (dd) \_\_\_\_\_ (mm), 2018

**PAYMENT MADE VIA :**

Post-dated cheques	Interact E-transfer
<input type="checkbox"/> Camp deposit due with registration Chq# _____	<input type="checkbox"/> Camp deposit due with registration
<input type="checkbox"/> Post-dated to May 1 <sup>st</sup> balance of Camp Fees Chq # _____	<input type="checkbox"/> Post-dated to May 1 <sup>st</sup> balance of Camp Fees
<input type="checkbox"/> Post-dated to May 1 <sup>st</sup> After Care Fees Chq # _____	<input type="checkbox"/> Post-dated to May 1 <sup>st</sup> After Care Fees

**Interact E-transfer PAYMENT PLAN**

**Parent/ Guardian Information**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Email \_\_\_\_\_ used to contact you for Interact E-transfer payment

Confidential Password used for Interact E-transfer \_\_\_\_\_