



MARCH BREAK CAMPS

MARCH 16 - 20, 2020 | 6 - 15 yrs

YMCA of Oakville's highly popular summer camp programs are coming to March Break!

Day Campers will have opportunities to participate recreational swimming, sports & games, arts & crafts, rock climbing and a Magical Mayhem theme day on Friday (costumes encouraged!)

Overnight campers will spend 4 days & 3 nights at YMCA Camp Pine Crest sleeping in winterized cabins, and experiencing a balance of indoor & outdoor programming based in outdoor experience.

How to register:

- Online at ymcaofOakville.org
- In person at the Peter Gilgan Family YMCA

For more information, please contact summercamps@oakville.ymca.ca

**REGISTER
TODAY!**

Day Camps | March 16 - 20

Challengers	6 - 9 yrs	9:00 - 4:00	\$210
Active Athletes	7 - 9 yrs	9:00 - 4:00	\$215
Star Athletes	10 - 12 yrs	9:00 - 4:00	\$225
Creative Arts	7 - 10 yrs	9:00 - 4:00	\$220

Before & After Care | March 16 - 20

Before Care	6 - 12 yrs	7:00 - 9:00	\$45
After Care	6 - 12 yrs	4:00 - 6:00	\$45

Overnight Camp | March 16 - 19

Camp Pine Crest	12 - 15 yrs	Mon - Thurs	\$420
-----------------	-------------	-------------	-------



2019 YMCA March Break Registration Form

☐ Day Camp ☐ Before Care ☐ After Care

☐ Overnight Camp: Is this your child's first time away from home? ☐ Yes ☐ No

Camper Information

First Name _____ Last Name _____
Preferred Name _____ Pronoun _____
Date of Birth (Year/Month/Day) _____ Age _____ Gender _____
Address _____ City _____ Postal Code _____
Primary Phone Number _____ Email Address _____

Parent/Guardian 1

Name _____
Address _____
Primary Phone Number _____
Alternate Phone Number _____
Email Address _____

Parent/Guardian 2

Name _____
Address _____
Primary Phone Number _____
Alternate Phone Number _____
Email Address _____

☐ I would like to receive news and information from the YMCA of Oakville

☐ I would like to receive news and information from the YMCA of Oakville

Custody ☐ Mother ☐ Father ☐ Both ☐ Guardian

If there is a custody arrangement we should be aware of, please provide a copy of the court documents

Health and Medical Information

Emergency Contacts

Please provide two authorized persons (not parents) to pick up your child and/or be contacted in the event of an emergency.

Name _____ Name _____
Primary Phone Number _____ Primary Phone Number _____
Alternate Phone Number _____ Alternate Phone Number _____

Doctor Information

Doctor's Name _____ Address _____
Phone Number _____ City _____
Health Card Number _____
Allergies ☐ Yes ☐ No _____

EPI Pen ☐ Yes ☐ No

Has your child: *(please list)*

Been immunized as required by the Education Act? ☐ Yes ☐ No Doctor's Name _____

Had recent operations/illnesses/injuries/diseases? _____

Been diagnosed with any medical conditions? _____

Is your child currently taking medication? _____

Program Support

Has your child been diagnosed with Special or behavioural needs? ☐ Yes ☐ No *(please specify)*

Does your child require one on one support at school? ☐ Yes ☐ No

Please list any additional information we should be aware of:

If you have answered yes to any of these questions, please contact Katherine Dziedzic regarding additional support at camp.

Cancellation and Refund Policy: Requests for refunds must be made in writing at least two weeks prior to March Break. Exceptions will be made for medical reasons, for which a doctor's note is required. A cheque will be mailed or your credit card will be refunded within 14 days. Refunds are subject to a \$25 administration charge.

Parent/Guardian Signature _____ Date _____