



CAMP REGISTRATION FORM 2024

Please complete the following information in full.

Camper Information

Last Name: _____ First Name: _____ Preferred Name: _____

Birth Date (y/m/d) _____ / _____ / _____ Age at Camp: _____ Grade Completed (as of July 2024): _____

Address: _____ City: _____ Province: _____

Postal Code: _____ Home Phone: _____

Please check one: First time residential camper Past camper at Kalalla Past residential camper at _____

Request to be in a cabin with (one friend within one year of age, who must request you): _____

All campers receive a free camp t-shirt. **Please indicate your size:**

Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large Adult Extra Large

Registrations received after June 15th are not guaranteed their requested size.

Parent/Guardian Information

Contact 1: Name: _____ Address: (if different from above): _____

Home Phone (if different from above): _____ Work Phone: _____ Cell Phone: _____

Email – please print clearly (all camp communication will be sent to this address): _____

Contact 2: Name: _____ Address: (if different from above): _____

Home Phone (if different from above): _____ Work Phone: _____ Cell Phone: _____

Email – please print clearly (all camp communication will be sent to this address): _____

Emergency Contact (other than parent/guardian, must be available during camp session):

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Camp Selection and Fees

- 1) Check off the program for which you are registering.
- 2) Enter the applicable camp fee for each selection in the far right hand column.
- 3) Add the applicable camp fee and any Building for the Future contribution, and insert the total in the highlighted box.

If finances are a barrier to your campers' participation in either the camper or the LIT program, subsidies are available. Please contact the Registrar (registrar@kalalla.com) for more information.

Camp	Dates	Camp Fees	Applicable Fee Amount
Campers Ages 7 to 15	Sunday July 21, 2024 to Sunday July 28, 2024	\$730 (camperships available, please inquire at registrar@kalalla.com)	
Leader-in-Training Program Age 16 by the end of 2023	July 20-28, 2024	\$995 (camperships available, please inquire at registrar@kalalla.com)	
<i>(optional) Building for the Future Contribution</i> <i>Income tax receipts will be issued for Building for the Future Contributions (charity number 12739 1886 RR0001)</i>			
Camp Total			

Terms and Conditions

- **REFUNDS:** Camp withdrawal requests received on or before June 1st will be issued a refund for camp fees less a \$50 administration fee.
Camp withdrawal requests submitted after June 1st and accompanied by a written explanation from a physician may be issued a refund for camp fees in full or part less a \$50 administration fee at the discretion of the Ottawa CGIT Committee and Camp Kalalla. Campers who choose to arrive late or depart early for non-medical reasons will not receive an adjustment on their camp fees. Should it be necessary to shift from an on-site overnight camp to a day camp, there will be the option for either a full refund or a partial refund of the difference in fees.
- **CAMPER DISMISSAL:** The Camp Director reserves the right to cancel a camper's enrollment or dismiss a camper whose conduct, influence, or behaviour is deemed unsatisfactory. No refund will be granted.
- **PHOTOGRAPHS:** Photographs/video or images of the children and staff participating in camp activities will be taken and may be used by CGIT Camp Kalalla for publicity purposes, including but not limited to the websites, printed materials and camp fair displays.
- **HEALTH FORM:** The Personal Health Form will be available on the website in February 2024. **Forms must be completed and submitted directly to the Health Team at health@kalalla.com.** The Parent/Guardian is responsible to inform CGIT Camp Kalalla of any changes to the health status of the participant or information on the Personal Health Form prior to the start of the camp session.
- **MEDICAL TRANSPORTATION:** As per the procedure listed at <http://kalalla.com/forms>, Senior Camp Staff and parents will work together to make arrangements for transportation and care of campers requiring medical attention.
- **HEALTH PROTOCOLS:** Participants displaying symptoms of communicable diseases, including those associated with Covid-19, must be picked up as soon as possible. It is essential that parents/guardians and emergency contacts be reachable during the entirety of camp.

I have read, understood, and agreed to the terms and conditions listed above.

Parent/Guardian Signature: _____ Date: _____

Payment Information

- 1) Calculate total payment amount.
- 2) Check-off the method you have selected for payment and provide information required for the selected payment method.

Payment Total: _____

e-transfer to treasurer@kalalla.com Security Question Answer: _____

(**DO NOT** send to registrar@kalalla.com) Date of e-transfer: _____

Personal Cheque, payable to Ottawa CGIT Committee (No post dated cheques, please. \$25 admin fee for NSF cheques)

*All forms and payment must be received by email or postal mail a minimum of 2 weeks prior to the start of the camp session. Please ensure that the **health form is completely filled in and signed** before sending everything.*

registrar@kalalla.com

Camp Kalalla Registrar
S112-455 Front Street East
Toronto, ON
M5A 0G2