

# New Customer Registration Form

## Customer Details:

### Full Name \*

First Name

Last Name

### Student/Child Full Name \*

First Name

Last Name

### Address \*

Street Address

Street Address Line 2

City

Province

Postal

### Phone Number \*

### E-mail

example@example.com

### Emergency Contact for your Rider if you are unavailable.

First Name

Last Name

**Phone Number \***

**How did you hear about us? \***

**Please Specify \***

**Any known medical issues, medications, etc that we would need to know in event of emergency - please state above. (I.e, diabetic, etc)**

**Which summer camp date are you choosing?**

Full day camps running from 8 am - 3pm. 3 day or 5 day options. 5 day option \$600+ gst, 3 day option \$350 + gst

**We offer credit card (2.5% usage fees) or etransfer for payment. Please specify which you need to use.**