

NOTRE DAME CSS ART CAMP 2024

AT NOTRE DAME CATHOLIC ELEMENTARY SCHOOL

CAMPER'S NAME:	GENDER:	D.O.B. (MM/DD/YYYY)
MAILING ADDRESS:		
PHYSICAL AILMENTS/MEDICAL CONDITIONS/ALLERGIES:		HEALTH CARD # (optional):
FRIENDS/SPECIAL REQUESTS:		HOW DID YOU HEAR ABOUT US?

SESSION (PLEASE CHECK ANY/ALL CAMP SESSIONS YOU WISH TO ATTEND)

Sessions will run from 9:00 A.M.- 3:30 P.M. <input type="checkbox"/> July 8 - July 12 <input type="checkbox"/> July 15 - July 19	<input type="checkbox"/> July 22 - July 26	T-SHIRT SIZE: PLEASE SELECT YOUR PREFERENCE YOUTH: XS S M L XL <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> ADULT: XS S M L XL <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Please note that only ONE shirt will be provided, even for multiple session campers.
<input type="checkbox"/> ONE Session \$300 includes camp t- shirt, art supplies, pizza (on Friday)		
Please make all checks payable to: Notre Dame Catholic Secondary School or you can pay via: https://hcdsb.schoolcashonline.com/ If you have any questions email tolane@hcdsb.org		

PARENT/GUARDIAN & EMERGENCY CONTACT INFORMATION

NAME:	EMAIL:
HOME PHONE:	MOBILE:
EMERGENCY CONTACT NAME:	RELATIONSHIP TO CAMPER:
EMERGENCY CONTACT NUMBER:	

All campers must be signed out by an authorized adult prior to their dismissal from camp. You can give your child permission to sign herself/himself out by checking the circle below or to be picked up by another adult:

Yes, I grant my child the authority to sign herself/himself out or be picked up by another adult.

I, the undersigned, understand that Notre Dame Catholic Secondary School, Notre Dame CSS camp staff/volunteers, and the Halton Catholic District School Board does not assume or accept responsibility for any expenses resulting from loss (personal injury, lost or stolen property, property damage, other expenses) or injuries sustained while engaged in any activity whatsoever whether on or off school premises. I also authorize my child's attendance at the Notre Dame CSS sport camp and certify that he/she is able to participate in the program activities. I declare having read and understood the above WAIVER/INFORMED CONSENT AGREEMENT in its entirety and hereby consent to participate acknowledging all the foregoing. If I am registering a minor, I certify that I am the parent/guardian for that minor, and agree to the above on their behalf, and I grant permission for use of any photos of my child to appear in future camp brochures or other advertising. Please Return this form with payment to the Notre Dame Main Office.

Parent/Guardian Name (Print): _____

Parent/Guardian Signature: _____

Date: _____