St. Mary's Church

65 Amelia Street, Barrie, Ontario L4M 1M7 www.stmarysba@archtoronto.org

Rible Comp Degistration - Tuly 2 - 5

Camper's Name:		Age:	Sex: M 🔲 F 🔲
Address:			
have received my Fi	irst Communion: Yes	No 🗌	
Grade entering in Sej	otember: Size of T-Sh	irt: $S(6-8) \square M(10-12) \square$	L (14-16) XL (18)
Authorization for pic	tures to be taken:		
_		Mother:	
		Business Mother:	
		Cell phone:	
		eached): Name:	
	i i i i i i i i i i i i i i i i i i i		
		ildren:	
		Allergies:	
f there are special m	edications to be administered at	t camp, state when and how often.	
Times	Days (M,T,W,Th,F)	Medication	Dosage
Parent/Guardian:	To the best of my knowledg participate in all camp activ	ge, my child is in good health an	nd is physically able to
	mont		
CONDITIONS OF HUVOI			and areas dry areas the abild
Conditions of Enrols 1. The parents	or guardians submitting this	application are those naving le	gai custoay over the chiic
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- accident or sickness, the Camp Directors, volunteers and St. Mary's Church are hereby released from any and all liability for any harm arising to our child while attending this camp. Each camper must be covered by Provincial Health Insurance or equivalent medical insurance.
- In the event of illness, parents/guardian will be notified immediately. 5.
- To my knowledge my son/daughter is capable physically and emotionally of participating in this **6.** camp.
- 7. This application must be accompanied with the registration cost of \$50.00/camper to a maximum of \$150.00 per family. Please make cheques payable to: St. Mary's Church and return to the parish office. Registration costs may be waived due to financial constraints. Please contact the parish office to enquire.
- 8. I have read this application and I accept the conditions of enrolment.

Parent/Guardian Signature:	Date:

Tel: [705] 728-2985 Fax: [705] 728-2989

secretary@stmarysbarrie.com

Email: