



# CAMP SQUEAH 2018 REGISTRATION

## Important Information

- **Payment Info:** Full payment must accompany a registration form in order to hold a spot. Fax or phone registrations may be paid by VISA or Mastercard.
- **Give the Gift of Camp:** The generosity of donors makes it possible for children of low-income families to attend camp through our Campership Fund. If you would like to contribute to the Campership Fund, please contact the camp office, donate online at [www.squeah.com](http://www.squeah.com) or include a separate cheque with your registration.
- **Financial Assistance:** The Campership Fund is available to children of families requiring financial assistance. Families may apply for campership by contacting the camp office for an application or by downloading it from our website, [www.squeah.com/camps/register/](http://www.squeah.com/camps/register/).
- **Early Bird Discount:** Save \$20 if we receive your registration and payment by February 28th. Discount applies to all camps except *Discoverers*, *Explorers*, *LT Programs*, *Daytrippers* and *Family Camp*.
- **Sibling Discount:** \$10 off for the second child and \$20 off for additional children from the same family. Does not apply to *Family Camp* or *Daytrippers*.
- **Cancellation Policy:** In the event of a cancellation, the registration amount, less a \$50 administration fee, will be refunded. Cancellations within two weeks of the camp session start date are not eligible for a refund except in situations of serious illness or injury.
- **Privacy of Information:** Registration data will only be used to register campers for summer camp and to mail next year's brochure. It will not be shared with anyone else for any other purpose.

## CAMP SQUEAH

[www.squeah.com](http://www.squeah.com)

#4—27915 Trans Canada Hwy, Hope BC V0X 1L3

Phone: 1.604.869.5353 | Fax: 604.869.5364 | Email: [registrar@squeah.com](mailto:registrar@squeah.com)

## Camp Info

Camp Name & Dates \_\_\_\_\_  
(e.g. Discoverers, Aug 9-11)

Cabinmate request \_\_\_\_\_  
(Cabinmate requests MUST be mutual and only ONE request per camper. Requests are NOT guaranteed.)

## Camper Info

Camper's Name \_\_\_\_\_  Boy  
 Girl

Birthday \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_  
(mm/dd/yyyy) (As of Dec 31/2018) (As of Dec 31/2018)

BC Care Card # \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Are you the parent/legal guardian of the camper?  Yes  No

Address \_\_\_\_\_  
(of camper and primary caregiver)

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_

Work Phone ( ) \_\_\_\_\_

Email Address \_\_\_\_\_

Preferred method of communication \_\_\_\_\_

## Important Information

### Credit Card Info Only:

Please charge my  Visa  Mastercard CCV# \_\_\_\_\_

Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_

Name on Card \_\_\_\_\_

Cardholder Signature \_\_\_\_\_

### Cheque Info Only:

Cheque # \_\_\_\_\_ Cheque Date \_\_\_\_\_

Name of Account Holder \_\_\_\_\_

Cheque or money-order enclosed \$ \_\_\_\_\_

Please send me a proof of payment

Office Use Only

CPSP