

# Sonshine Day Camp Registration Form

- I hereby release Bridletowne Park Church/Toronto City Mission, its staff and sponsors, from responsibility and liability for any injury or illness that my child may sustain during this activity, knowing that reasonable precautions for the health and safety of the children will be taken.
- In the event of an emergency, I hereby authorize an adult leader of this event, as an agent for me, to consent to any x-ray examination; medical, dental or surgical diagnosis; treatment; and hospital care advised and supervised by a physician, surgeon, or dentist (as appropriate) licensed to practice under the laws of the province of Ontario, either at a doctor's office or any hospital. I expect to be contacted as soon as possible. The parents/guardians are responsible for any additional expense that may result from such services.
- I hereby give permission to Bridletowne Park Church/Toronto City Mission to use photographs and any other media representation of myself and my family members at the discretion of the mission. I release Bridletowne Park Church/Toronto City Mission, its officers, directors, volunteers and the staff from any and all responsibility/liability that may arise as a result of the use of such photos/media.
- I hereby give permission for my child, with adult supervision, to go on outings for the duration of my child being registered for Sonshine Day Camp.

Parent Signature \_\_\_\_\_

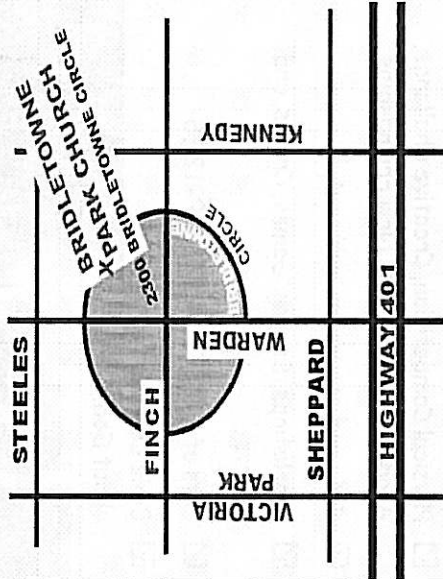
Date \_\_\_\_\_

## Four Ways to Register

- Mail** - Complete both sides of the registration form & mail to address below.
- Fax** - Complete both sides of the registration form & fax to 416 497-3600.
- Email** - scanned completed registration forms to [guy@bridletowne.com](mailto:guy@bridletowne.com)
- Drop Box** - place completed form into church mailbox (2300 Bridletowne Circle).

A confirmation of receipt of registration will be provided by telephone or email. Payment should be made no later than first day of camp. Cheques can be made out to *Sonshine Day Camp*.

**416-497-3599x103**



## Bridletowne Park Church

2300 Bridletowne Circle,  
Scarborough, ON, M1W 2L2

Contact: Guy Freeman, 416-497-3599x103

[guy@bridletowne.com](mailto:guy@bridletowne.com)



# Bridletowne Park Church



# Sonshine Day Camp

**July 5 - August 20, 2010**

Community Day Camp for kids  
grade 1 to grade 8 grads.

## Please Read

- Brookmill Blvd School**  
**Rate: \$40/week per child**
- Regular Rate:** \$60/week per child  
2 Siblings register for \$50/week each  
3 Siblings register for \$40/week each
- Contact us to see if you qualify for **FINANCIAL ASSISTANCE !!**
- Sonshine T-Shirts cost \$5.00. These are mandatory for day trips.
- Drop-off between 8:30am-9:00am Pick-up is 3:30pm at Bridletowne Park Church Scarborough (2300 Bridletowne Circle)
- A schedule of our day trips will be given when your child starts camp. All day trips will be on the Friday of the week, unless otherwise noted.
- Multi-Site Days**  
- Once a week the BPC camp will combine with another Sonshine Day Camp located at Chinese Gospel Church Scarborough (2610 Birchmount Rd) for fun, games, and competition. Parents will be given additional information once camp starts.
- Sonshine Day Camp is **NUT FREE** Please do not send snacks containing any type of nuts.
- We do not provide lunches.
- Please label all belongings with child's first and last name.



## What to Expect

- 7 weeks of summer fun and friends.
- Well trained and enthusiastic staff.
- Weekly day trips to offsite locations.
- Multi-site days - activities with other TCM sites.
- Physical Competition, Creative Challenge, Academic Growth, and New Friendships
- Safe and secure environment.
- Workshops, Singing, Games, Crafts, and Sports.
- Lots of PRIZES, PRIZES, PRIZES
- Bible Lessons about God.



## Sonshine Day Camp Registration Form

Camper Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Birthday: \_\_\_\_\_ Grade: \_\_\_\_\_  
 Health Card #: \_\_\_\_\_  
 Allergies / Relevant Health Problems: \_\_\_\_\_

Parents/Guardian Name: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Work or Cell: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Emergency Contact: \_\_\_\_\_  
 Emergency Telephone: \_\_\_\_\_

Will you be picking up your child(ren)? Yes / No If not you, who will? \_\_\_\_\_

*Please contact us when somebody other than you or your designated alternate will be picking up your children.*

If your child is ten (10) years old or older, can he/she walk home alone? Yes / No

Please complete both sides →

Week Selection: Please select your sessions on the chart below. Week of Aug 2 is a 4 day week due to Civic holiday.	
July 5-9	Aug 3-6
July 12-16	Aug 9-13
July 19-23	Aug 16-20
July 20-24	

Total Payment: \_\_\_\_\_ Method: Cash Cheque

\*Cheques payable to: Sonshine Day Camp