

# 2010 Day Camp Season\*

Full Session	- July 5 to August 27, 2010
July Session	- July 5 to July 30, 2010
August Session	- August 3 to August 27, 2010
Camp Closed	- August 2, 2010
Week 9	- August 30 - September 3, 2010

Register before January 18, 2010, and receive the following

**Early Bird discount** (per family):

8 week session - \$175 off your camp fees

4 week session - \$150 off your camp fees

A \$340 deposit per child, currently dated, together with the balance, dated May 1, 2010, must accompany your registration.



## Partial Day Camps

## Full Day Camps

### Small Wonders

Season	\$ 1,887
July	\$ 1,106
August	\$ 1,010
Two Weeks*	\$ 600

### Cubs

Season	\$ 1,933
July	\$ 1,148
August	\$ 1,040
Two weeks*	\$ 670

### Bears

Season	\$ 2,471
July	\$ 1,473
August	\$ 1,392
Two Weeks*	\$ 888

### Tiggers/Coyotes/Jaguars/Cheetahs

Season	\$ 2,579
July	\$ 1,488
August	\$ 1,446
Two Weeks*	\$ 880

### Sports Camp

Season	\$ 2,956
July	\$ 1,612
August	\$ 1,559
Two Weeks	\$ 980

### Tennis or Golf Academy

July	\$ 2,045
August	\$ 2,045
Two Weeks*	\$ 1,042
One Week*	\$ 530

### Counsellor in Training

Season	\$ 2,144
July	\$ 1,422
August	\$ 1,304

### Elite Golf Programme

July	\$ 2,713
August	\$ 2,713
Two Weeks	\$ 1,375
One Week*	\$ 725

### Transportation

\$73 per week

### Lunch

\$45 per week

### Extended Hours

\$52 per week

\* The price above is not subject to GST at the time of printing this brochure however should the new HST apply the rates set out herein shall be subject to this additional tax if applicable.

# 2010 Application Day Camp Enrollment



Please Print Clearly

(Circle One - indicates how your mail will be addressed)

Mr. & Mrs., Dr. & Mrs., Mr. Ms. Other \_\_\_\_\_ Marital Status \_\_\_\_\_

Family Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Home Tel: \_\_\_\_\_

Home Email: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Father's Cell: \_\_\_\_\_

Mother's Cell: \_\_\_\_\_

Father's Business Tel: \_\_\_\_\_

Mother's Business Tel: \_\_\_\_\_

Secondary Contact if parents cannot be reached:

Name: \_\_\_\_\_

Tel: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_

Tel: \_\_\_\_\_

**Permission Form:** I/we agree to allow my/our child(ren) to participate in all camp activities and in supervised trips to places not on camp property. I/we hereby apply for registration for the herein named child(ren) for the camping services indicated on this application. **(a)** To give camp officials authority to act on my behalf. **(b)** To release and indemnify R.H.C.C. Holdings Ltd. and its staff from any and all claims for damages arising as a result of any injury, accident or otherwise sustained by the herein child(ren) arising from participation in any camp activities. I/we consent to the use of the camper's likeness for publicity purposes. I/we have read the refund policy.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

( Please complete both side of this application form )



8905 Bathurst Street, Richmond Hill Ontario, L4C OH4  
Tel: 905-731-2800 Fax: 905-731-7283  
www.richmondhillcountryclub.com

### Camper #1

First Name: \_\_\_\_\_ Family Name: \_\_\_\_\_

Sex: \_\_\_\_\_ D.O.B. (M/D/YR): \_\_\_\_\_

Health Card#: \_\_\_\_\_

Present Swim Level: \_\_\_\_\_

Friends Preferred as Group Mates (2 Only) \_\_\_\_\_

Season  July  August

2 Week (Dates) \_\_\_\_\_ Tennis / Golf Academy 1 Week (Dates) \_\_\_\_\_

Fee (see bonus offer) Valid until January 18, 2010

Please indicate choice of Camp.

### Camper #2

First Name: \_\_\_\_\_ Family Name: \_\_\_\_\_

Sex: \_\_\_\_\_ D.O.B. (M/D/YR): \_\_\_\_\_

Health Card#: \_\_\_\_\_

Present Swim Level: \_\_\_\_\_

Friends Preferred as Group Mates (2 Only) \_\_\_\_\_

Season  July  August

2 Week (Dates) \_\_\_\_\_ Tennis / Golf Academy 1 Week (Dates) \_\_\_\_\_

Fee (see bonus offer) Valid until January 18, 2010

Please indicate choice of Camp.

### Camper #3

First Name: \_\_\_\_\_ Family Name: \_\_\_\_\_

Sex: \_\_\_\_\_ D.O.B. (M/D/YR): \_\_\_\_\_

Health Card#: \_\_\_\_\_

Present Swim Level: \_\_\_\_\_

Friends Preferred as Group Mates (2 Only) \_\_\_\_\_

Season  July  August

2 Week (Dates) \_\_\_\_\_ Tennis / Golf Academy 1 Week (Dates) \_\_\_\_\_

Fee (see bonus offer) Valid until January 18, 2010

Please indicate choice of Camp.

### CALCULATION OF FEES, DEPOSITS & DISCOUNTS

Camp Fees \_\_\_\_\_

Less Discount for RHCC member (# \_\_\_\_\_ )

Less 10% if registering more than 1 child per family \_\_\_\_\_

Lunch (add \$45.00 per week) \_\_\_\_\_

Transportation (add \$73.00 per week) \_\_\_\_\_

Extended hours (add \$52.00 per week) \_\_\_\_\_

**TOTAL** \_\_\_\_\_

Less deposit of \$340 per child (must accompany this application)

Balance due May 1, 2010 \_\_\_\_\_

(A posted dated cheque or credit card # must accompany this application.)

Method of Payment  Cheque  Cash

Credit Card #: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

I hereby authorize the Richmond Hill Country Club to charge my credit card for camp fees and related activities.

SIGNATURE: \_\_\_\_\_

Mail completed form to Richmond Hill Country Club



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Tel: 905-731-2800 Fax: 905-731-7283  
www.richmondhillcountryclub.com

### Office use only

Signature: \_\_\_\_\_

Group: \_\_\_\_\_

Entered: \_\_\_\_\_

### Please read Carefully

#### Cancellation and refund policy

- Your deposit and any post dated payments are refundable (less a service charge of \$175 per child), provided written notice is received prior to April 30, 2010. After that date there will be no refunds of fees.
- Fees cannot be refunded for days missed unless consecutive weeks occur. A refund of 50% of the unused fees will be made upon written request including a doctor's certificate.
- Refunds will be issued in September 2010.
- Refunds of food or busing will be given as a credit for any youth or camp programmes.
- No other refunds are possible.
- This policy will be strictly adhered to.