



CAMP AK-O-MAK (Since 1928)

Registration Form for Summer 2012



Please print carefully and return completed application to: 14-441 Stonehenge Drive, Ancaster, Ontario Canada L9K 0B1

CAMPER INFORMATION

First Name: _____ Middle Name: _____ Last Name: _____

Date of Birth: Day: _____ Month: _____ Year: _____ Age Start of Camp: _____ Number of years at Camp Ak-O-Mak: _____

Home Address: Street: _____ City: _____

Province/State: _____ Country: _____ Postal/Zip Code: _____

Parent/Guardian 1 Name: _____ Parent/Guardian 2 Name: _____

Home Phone: _____ Home Phone: _____

Day/Cell Phone: _____ Day/Cell Phone: _____

E-mail: _____ E-mail: _____

SESSION INFORMATION

(All fees in **Canadian Dollars** and Includes Base Tuition, 13% HST (Harmonized Sales Tax) plus a Refundable Expense Account)

<u>Session</u>	<u>Term</u>	<u>Begins</u>	<u>Ends</u>	<u>Complete Tuition</u>
<input type="checkbox"/> Session 1:.....	7 Weeks.....	June 27th, 2012.....	August 15th, 2012.....	\$5,762.70
<input type="checkbox"/> Session 2:.....	4 Weeks.....	June 27th, 2012.....	July 24th, 2012.....	\$4,148.50
<input type="checkbox"/> Session 3:.....	2 Weeks.....	June 27th, 2012.....	July 11th, 2012.....	\$2,043.36
<input type="checkbox"/> Session 4:.....	3 Weeks.....	July 25th, 2012.....	August 15th, 2012.....	\$3,126.70
<input type="checkbox"/> Session 5:.....	2 Weeks.....	July 25th, 2012.....	August 8th, 2012.....	\$2,043.36
<input type="checkbox"/> Session 6:.....	2 Weeks.....	August 18th, 2012.....	September 1st, 2012.....	\$1,908.00
<input checked="" type="checkbox"/>	Deposit due upon registration (non-refundable). Balance due two weeks prior to start of Session.....			\$400.00
<input type="checkbox"/>	Trip to Niagara Falls (Available for 7 week and 4 week sessions only).....			\$120.00
<input type="checkbox"/>	Travel to Camp From Toronto Airport.....		\$110.00	<input type="checkbox"/>
	Travel To Toronto Airport From Camp.....		\$110.00	

PAYMENT INFORMATION

Cheque Master Card Visa

Authorized Amount: _____ Card Number: _____ Expiration Date: _____

Name on Card: _____ Authorized Signature: _____

The \$400.00 reservation deposit required for each session can be paid by Cheque, Visa, MasterCard or Wire Transfer. An information package containing details of the Invoicing, Transport, Medical, Clothing List, & Rental will be mailed or emailed in the spring or soon after receipt of this Registration Form. Please return Registration Form to the Business Office, information below. You will receive an email acknowledgement upon receipt of Registration Form.

HOW DID YOU HEAR ABOUT CAMP AK-O-MAK?

Friend
 Exhibit/Display (please let us know the location) _____
 Advertisement (which publication/website?) _____

PARENT/GUARDIAN INFORMATION

I agree Camp Ak-O-Mak is released from liability in connection with medical treatment and unavoidable accidents. Camp Ak-O-Mak has my permission to use necessary medical measures in the event of an emergency. My child has permission to leave the campgrounds with authorized camp staff for scheduled trips and outings. Also, I give Camp Ak-O-Mak permission to utilize my child's photograph or likeness in camp promotional materials.

Parent or Guardian Signature: _____ Date: _____

Business Office: 14-441 Stonehenge Drive, Ancaster, Ontario, Canada L9K 0B1, Tel.: 416.427.3171, Fax: 905.304.2982

Email: Dianne@campakomak.com

Website: www.campakomak.com

Summer Address: 240 Akomak Road, Ahmic Harbour, Ontario, Canada P0A 1A0, Tel.: 705.387.3810, Fax: 705.387.0077