

Dear Parent(s)/Guardian(s),

We are pleased to announce that the Leonardo da Vinci Centre is offering their **Teen Leadership Summer Camp** once again this year!

Should you be interested in placing your teen in this program, we ask that you kindly fill out the following registration form, enclose your Payment and return it to the Leonardo da Vinci Centre no **later than June 3rd, 2011**.

**Registration Form**

Name of child: (last name) \_\_\_\_\_ (first name) \_\_\_\_\_
Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_
Address: \_\_\_\_\_ Apt: \_\_\_\_\_
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_
Name of School: \_\_\_\_\_ Grade: \_\_\_\_\_ T-Shirt Size: S\_\_ M\_\_ L\_\_ XL\_\_
Name of Mother: \_\_\_\_\_ Telephone Number: \_\_\_\_\_
Social Insurance Number: \_\_\_\_\_ Work: \_\_\_\_\_
(Income tax receipt) Cell: \_\_\_\_\_ Email: \_\_\_\_\_
Name of Father: \_\_\_\_\_ Telephone Number: \_\_\_\_\_
Social Insurance Number: \_\_\_\_\_ Work: \_\_\_\_\_
(Income tax receipt) Cell: \_\_\_\_\_ Email: \_\_\_\_\_
Contact Person In Case of Emergency: \_\_\_\_\_ Telephone Number: \_\_\_\_\_
Cell: \_\_\_\_\_

**Medical Form**

Allergies: \_\_\_\_\_ Other Health Concerns: \_\_\_\_\_
Routine Medication: \_\_\_\_\_

Please be advised that failure to provide necessary information regarding the well-being of your teen disrespects his/her safety, the teens around him/her, and the program in general. The above information is confidential and will only be made public to relevant personnel. I have provided the CLDV Camp with all necessary medical data. In the event of an emergency, I give The LDV Center the authority to secure medical care for my teen.

**OUTINGS**

- Week 1 – June 27th to July 1st [ ] Go Kart / Mini Putt
Week 2 – July 4th to July 8th [ ] Trapeze Workshop with Trapezium
Week 3 – July 11th to July 15th [ ] Rock Climbing – Horizon Roc & CPR Training
Week 4 – July 18th to July 22nd [ ] La Ronde
Week 5 – July 25th to July 29th [ ] Trucs et Truffes
Week 6 – August 1st to August 5th [ ] Granby Zoo
Week 7 – August 8th to August 12th [ ] Journalism Workshop – With One of Montreal’s Leading Media Network
Week 8 – August 15th to August 19th [ ] Camp Show
Week 9 – August 22nd to August 26th [ ] Dynamix

**Payment**

\$150.00 (plus taxes) X \_\_\_\_\_ (plus \$30.00 registration fees) = Total Amount: \$ \_\_\_\_\_

Visa/MasterCard: \_\_\_\_\_ Expiry: \_\_\_\_\_ Cheque: \_\_\_\_\_

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

Cancellation requests must be made in writing, any verbal cancellations will not be processed. Full reimbursement can be granted if received before noon by Friday June 17th, 2011.

All requests for cancellation past this deadline must be accompanied by a medical certificate. Without the latter there is no reimbursement.

\*\*\*\$15.00 fee will be charged for all NSF cheques.

\*\*\*\$30.00 registration fees not refundable.