



RETURNING CAMPER APPLICATION

• 2010 SEASON •

PLEASE RETURN TO:

Camp Wenonah, 3584 Commerce Court, Burlington, Ontario, Canada, L7N 3L7

(905) 631-2849 (phone) / (905) 631-2850 (fax)

e-mail: info@campwenonah.com / website: www.campwenonah.com

NAME OF CAMPER, POLARIS, WCIT: _____

Birthdate: _____ Please check: Male Female

How many years has the camper previously attended Wenonah? _____ (First Year: _____)

Do you need to update any contact information since the 2009 season (*address, home phone number, work number, cell phone number, e-mail, etc.*)? **Please indicate:**

2010 SUMMER CAMP PERIODS (*Please indicate Period choice(s) for 2010 with a ✓*)

• **ONE MONTH PROGRAMS** (8-15 Year Olds)

- JULY CAMP** Sunday, July 4 - Saturday, July 31, 2010
- AUGUST CAMP** Sunday, August 1 - Saturday, August 28, 2010

• **TWO WEEK PERIODS** (8-15 Year Olds)

JULY

- PERIOD ONE** Sunday, July 4 - Saturday, July 17, 2010
- PERIOD TWO** Sunday, July 18 - Saturday, July 31, 2010

AUGUST

- PERIOD THREE** Sunday, August 1 - Saturday, August 14, 2010
- PERIOD FOUR** Sunday, August 15 - Saturday, August 28, 2010

• **INTRODUCTORY PERIODS (ONE WEEK, FIVE DAYS & THREE DAYS)**

- PERIOD ONE A** (7-13 Year Olds) Sunday, July 4 - Saturday, July 10, 2010
- PERIOD ONE B** (7-13 Year Olds) Sunday, July 11 - Saturday, July 17, 2010
- PERIOD FIVE** (7-13 Year Olds) Monday, August 30 - Friday, September 3, 2010
- WEEnonah** (5-7 Year Olds) Monday, August 30 - Wednesday, September 1, 2010

• **LEADERSHIP DEVELOPMENT PROGRAMS**

POLARIS (16-17 Year Olds) **** must turn 16 by December 31, 2010**

- JULY** (Sunday, July 4 - Saturday, July 31, 2010) **AUGUST** (Sunday, August 1 - Saturday, August 28, 2010)

WCIT (17 Year Olds) **** must turn 17 by December 31, 2010**

- JULY** (Sunday, July 4 - Saturday, July 31, 2010) **AUGUST** (Sunday, August 1 - Saturday, August 28, 2010)

2010 FEES IN CANADIAN DOLLARS (GST# 892427188RT)

Please note:

- Registration is on a first-come, first-served basis.
- Registration before September 4, 2009 does not guarantee a spot in the preferred Period, it only guarantees the Priority Fee rate.

PRIORITY FEES

Payment of full fee (including taxes) required at time of registration, no later than Friday, September 4, 2009

REGULAR FEES

Deposit required at time of registration (**\$350.00 per week or \$75.00 for WEEnonah**); balance due April 1, 2010

PERIODS	PRIORITY FEES			REGULAR FEES		
	FEE	TAX (13% HST)	TOTAL FEE	FEE	TAX (13% HST)	TOTAL FEE
ONE MONTH PERIODS <i>(July Camp or August Camp)</i>	\$2,880.00	\$374.40	\$3,254.40	\$3,080.00	\$400.40	\$3,480.40
POLARIS PROGRAM	\$2,880.00	\$374.40	\$3,254.40	\$3,080.00	\$400.40	\$3,480.40
WCIT PROGRAM	\$2,880.00	\$374.40	\$3,254.40	\$3,080.00	\$400.40	\$3,480.40
TWO WEEK PERIODS	\$1,590.00	\$206.70	\$1,796.70	\$1,690.00	\$219.70	\$1,909.70
ONE WEEK PERIODS	\$835.00	\$108.55	\$943.55	\$885.00	\$115.05	\$1,000.05
PERIOD FIVE	\$650.00	\$84.50	\$734.50	\$675.00	\$87.75	\$762.75
WEEnonah	\$175.00	\$22.75	\$197.75	\$190.00	\$24.70	\$214.70

* The above fees do not include transportation (*bus to/from Camp*), One Month Camper Day in Town, laundry, out trips, or other incidentals. Those fees will be requested with the Final Instructions Package, sent in March 2010.

PAYMENT SUMMARY

TOTAL FEES FOR ALL PERIODS ATTENDING **A:** _____

CONTRIBUTION TO WENONAH FOUNDATION **B:** _____
(assisting families in need with Camp fees)

GRAND TOTAL (A+B):

PAYMENT IS ACCEPTED by cheque (*in Canadian dollars*) or Money Order (*Canadian dollars*).

CHEQUE/MONEY ORDER: PLEASE MAKE PAYABLE TO CAMP WENONAH

I am enclosing my cheque/money order for \$ _____ as a deposit (**\$350.00/week or \$75.00 for WEEnonah**) full payment

I am also enclosing my cheque for \$ _____ for the balance dated: _____
no later than April 1, 2010

CONDITIONS OF ENROLMENT

I understand that my child will participate in the full program and all activities unless I advise the Camp otherwise in writing at the time of application. I understand that the Camp Administration reserves the right to dismiss a camper who, in their opinion, is a hazard to the safety or rights of others, or who appears to have rejected the reasonable expectations of the Camp as set out in the Code of Conduct in the Final Instructions package (sent in the Spring). I also understand that Camp Wenonah can not guarantee my child's cabin mate request if they are not registered for the same length of time or are not within a year of each other in age. To the best of my knowledge, my child is in good health. If there is exposure to any infectious disease and/or any change in my child's condition prior to attending Camp, I will notify the Camp in writing. I give permission to the physician and nurses selected by Camp Wenonah to assess and give medical treatment including prescriptions to my child when necessary. In the event that my child requires prescribed medication, X-ray or treatment beyond which is available at Camp, I understand that I will be responsible for payment.

I have read all the conditions of enrolment and I accept the terms as described and I further understand the refund policy for Camp Wenonah as detailed on the Essential Information Sheet.

Parent/Sponsor Signature: _____

Date: _____