Mennonite Heritage Village - Winter Day Camp Child Registration Form

Camp Dates: Dec 30-31 2024, Jan. 2-3 2025

Child's Name:			
Address:			
City:			·
Telephone (home):		Mobile:	
Date of birth:		Gender: Male	Female
Additional Children:			
Name:			
Date of birth:		Gender: Male	Female
Name:			
Date of birth:			Female
Name:			
Date of birth:		Gender: Male	☐ Female
Mother/Guardian:		· · · · · · · · · · · · · · · · · · ·	
Address:	(last name)	(first name)	
		Postal Code:	
Telephone (home):	Work:Mobile:		e:
Email address:			
Father/Guardian:			
	(last name)	(first name)	
		Postal Code:	
Telephone (home):	Work:	Mobile:	
Email address:			
Emergency Contact In			
Name:	Street address:		
Relationship to child:	Email Address:		
Telephone (daytime):	Mobile:		

Health Information:	
Physician's Name:	Telephone:
	Postal Code:
Allergies/Medical Condition:	
List special needs, if applicable:	
***********	***************
Cost of registration: \$136.00/ch	ild (10% Discount for Members)
well-trained staff and a safe environment of the staff and a safe	at MHV will do its part to provide qualified, onment, agree to assume all risks, and to nless Mennonite Heritage Village, its agreement is made) and representatives, from ay occur to the camper or the camper's
This form contains Terms of Agre binding contract once signed.	ement as an additional sheet, and forms a
I/We acknowledge that we have resame and warrant the information	ead the terms of agreement and consent to the set out above is correct.
Date:	
Signature of parent/guardian:	
	nnonite Heritage Village permission to use any nild during the program to use for promotional
Date:	
Signature of parent/guardian:	
	r Office Use Only************************************
Payment made by: Cheque Credit Car	d
Payment accepted by: Confirmation sent by:	 Date: