



Mennonite Heritage Village (Canada) Inc.

231 PTH 12 N. Steinbach, Manitoba, Canada R5G 1T8

Phone: 204-326-9661 Email: info@mhv.ca

www.mhv.ca

WINTER DAY CAMP REGISTRATION FORM

December 29th-31st, 2025

Child's Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone (Home): _____ Mobile: _____

Date of birth: _____ Gender: ☐ Male ☐ Female

Additional Children

Name: _____

Date of birth: _____ Gender: ☐ Male ☐ Female

Name: _____

Date of birth: _____ Gender: ☐ Male ☐ Female

Name: _____

Date of birth: _____ Gender: ☐ Male ☐ Female

Mother/Guardian: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone (Home): _____ Mobile: _____

Email Address: _____

Father/Guardian: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone (Home): _____ Mobile: _____

Email Address: _____

Emergency Contact Information:

Name: _____

Address: _____

Relationship to Child: _____

Telephone (Daytime): _____ Mobile: _____

Email Address: _____



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Health Information: _____

Physician's Name: _____ Telephone: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Allergies/Medical Condition: _____

List special needs (if applicable): _____

Cost of Registration: \$105 (10% discount for Members)

Parents/guardians, recognizing that MHV will do its part to provide qualified, well trained staff and a safe environment, agree to assume all risks, and to release, indemnify, and save harmless Mennonite Heritage Village, its employees (on whose behalf this agreement is made) and representatives, from any injury, loss of damage that may occur to the camper or the camper's property.

This form contains Terms of Agreement as an additional sheet, and forms a binding contract once signed.

I/We acknowledge that we have read the terms of agreement and consent to the same and warrant the information set out above is correct.

Date: _____

Signature of parent/guardian: _____

Photo Consent Form:

We, as parent/guardian, grant Mennonite Heritage Village permission to use any photos that may be taken of my child during the program to use for promotional purposes.

Date: _____

Signature of parent/guardian: _____

*****For Office Use Only*****

Payment made by:

☐ Cheque

☐ Credit Card

☐ Debit

☐ Cash

Payment accepted by: _____ Date: _____

Confirmation sent by: _____ Date: _____