

# YORK YOUTH CONNECTION

## A York University Summer Day Camp

Division of Advancement  
York University, West Office Building  
4700 Keele St., Toronto, ON M3J 1P3  
Tel: 416-736-5669 Email: yyc@yorku.ca

### 2014 REGISTRATION

Please complete all fields.

---

#### CHILD INFORMATION

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_  
Home address: \_\_\_\_\_ City: \_\_\_\_\_  
Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Gender: [ ] Male [ ] Female  
Date of birth (mm/dd/yyyy): \_\_\_/\_\_\_/\_\_\_ Has child attended YYC before? [ ] No [ ] Yes

---

#### FAMILY INFORMATION

Parent/Guardian's surname: \_\_\_\_\_ Parent/Guardian's first name: \_\_\_\_\_  
Home address: \_\_\_\_\_ City: \_\_\_\_\_  
Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Home phone: (\_\_\_\_)-\_\_\_\_-\_\_\_\_  
Business phone: (\_\_\_\_)-\_\_\_\_-\_\_\_\_ Cell-phone:(\_\_\_\_) -\_\_\_\_-\_\_\_\_  
E-mail address: \_\_\_\_\_

Are you the legal guardian of the child named above? [ ] Yes [ ] No

#### Secondary Parent or Guardian Contact Info.

Parent/Guardian's surname: \_\_\_\_\_ Parent/Guardian's first name: \_\_\_\_\_  
Home address: \_\_\_\_\_ City: \_\_\_\_\_  
Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Home phone: (\_\_\_\_)-\_\_\_\_-\_\_\_\_  
Business phone: (\_\_\_\_)-\_\_\_\_-\_\_\_\_ Cell-phone:(\_\_\_\_) -\_\_\_\_-\_\_\_\_  
E-mail address: \_\_\_\_\_

Please note: additional info re: family status and pick-up/drop-off arrangements will be requested upon confirmation of registration.

---

#### EMERGENCY CONTACT (different than above)

##### Emergency Contact Info.

Surname: \_\_\_\_\_ First name: \_\_\_\_\_ Relationship to child/camper \_\_\_\_\_  
Home phone: (\_\_\_\_)-\_\_\_\_-\_\_\_\_ Business phone: (\_\_\_\_)-\_\_\_\_-\_\_\_\_  
Cell-phone:(\_\_\_\_) -\_\_\_\_-\_\_\_\_ E-mail address: \_\_\_\_\_

Please note: Primary, secondary and emergency contacts have authorization to pick up camper/child, receive information about camper/child and have access to camper/child during camp hours. In the event of emergency, YYC contacts parent(s)/guardian(s) first.

## YYC CAMP SESSION SELECTION

Check the sessions you are interested in:

Session	Duration	Dates	Cost
<input type="checkbox"/> 1	2 weeks	June 30-July 11 (9days)	\$320 (\$270*)
<input type="checkbox"/> 2	2 weeks	July 14-July 25 (10days)	\$355 (\$300*)
<input type="checkbox"/> 3	2 weeks	July 28-August 8 (9days)	\$320 (\$270*)
<input type="checkbox"/> 4	2 weeks	August 11-22 (10days)	\$355 (\$300*)

Any 1 week Provide dates: \_\_\_\_\_ \$185

Additional Information:

8 weeks (full summer):

\$1200 (\$1020\*)

Any 1 week:

\$185 (no discount available)

\*15% discount for York employees, students and alumni

Do you need BEFORE-CARE? (8:00am - 8:30am, no additional cost)?  Yes  No

Do you need AFTER-CARE? (4:30pm - 5:30pm, \$10 per week)?  Yes  No

Before- and after-care available Monday to Friday.

Please select all that apply to you:

YorkU employee  YorkU student  YorkU alumni  Community resident (Black-Creek community)  Other

If you are a student/alumni, please provide your student/alumni number: \_\_\_\_\_

Camper t-shirt size: Youth:  S/P  M  L  XL Adult:  S/P  M  L  XL

Does the Camper have any siblings attending camp?  No  Yes, please provide name(s) \_\_\_\_\_

Are you applying for subsidy?  Yes  No

Please note: A separate subsidy application form and required documentation must accompany completed registration form. Please refer to subsidy application for drop-off locations for forms. Subsidies will be reviewed on a first come-first served basis, once all documents needed for review are received. Priority is given to eligible families residing in the Black Creek community.

Please note: A separate registration form is required for each camper/child.

---

## PARENT/GUARDIAN APPROVAL

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

*By signing and dating above, you confirm the information provided is correct and accurate.*

Please make cheques or money orders payable to: "York University – York Youth Connection Summer Day Camp"

A deposit of 50% of each camper/child's total camp fees must accompany registration form (unless applying for subsidy). Remaining balances are due by June 30<sup>th</sup>, 2014 (either in cash, money order or cheque – post-dated cheques are not accepted).

For clarification re: payment options please contact (416) 736-2100 ext. 44206.

Forward completed registration and payment to: York Youth Connection,  
Community & Alumni Relations, Division of Advancement  
York University, West Office Building  
4700 Keele Street Toronto, ON M3J 1P3  
Fax: (416) 650-8220

Applicants seeking subsidy, please refer to subsidy application form for drop-off location(s) for completed forms

**Please Note:** Payment must accompany this registration form. If applying for subsidy, please ensure subsidy application form and required documentation are submitted along with completed registration form. Upon confirmation of registration and before start of camp session, a Camper Package will be distributed and additional information/forms must be completed and submitted in order for camper/child to participate.

## PRIVACY NOTICE

Personal information in connection with this form is collected under the authority of *The York University Act, 1965* (S.O. 1965, c. 143, s. 5) and will be used for York Youth Connection Summer Camp and related administration or consistent purposes. If you have any questions about the use, collection and disclosure of personal information by York University, please contact the Manager, Community Relations (416) 735-5669 or [yyc@yorku.ca](mailto:yyc@yorku.ca).

