



Registration Form 2018

Requested Camp:	<input type="checkbox"/> July 30 - Aug 3 (Ages 7 - 10)	<input type="checkbox"/> Aug 13 - 17 (Ages 5 - 8)	<input type="checkbox"/> Aug 27 - Aug 31 (Ages 5 - 8)
Requested Half Day Camp:	<input type="checkbox"/> Aug 7 - 10 (Ages 3 - 4)	<input type="checkbox"/> Aug 20 - 24 (Ages 3 - 4)	<input type="checkbox"/> am <input type="checkbox"/> pm <input type="checkbox"/> both

Personal Information

Child's Full Name:		Preferred Name:	
Child's Age as of July 1, 2018 :		<input type="checkbox"/> Female	<input type="checkbox"/> Male
Child's Birthday	Day:	Month:	Year:
Parent's Full Name(s):			
Home Address:			
City:		Province:	Postal Code:
Home Phone:		Cell Phone:	
Email:			

Emergency Contact Information

Name:	
Home Phone:	Cell Phone:

Medical Information

Child's Healthcare Number:			
Immunizations up to date?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Does the child have any allergies? List Here:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Camp Fees

Calgary Apraxia Parents Exchange understands that families affected by CAS have substantial therapy costs already, so we have strived to keep our camp fees to a minimum. The camp costs are \$150/child for full day and \$75/child for half day. If camp fees are a burden please contact us for other arrangements.

Family BBQ the last afternoon of Camp

How many adults do you anticipate coming?	
How many children do you anticipate coming?	
Are you able to volunteer to assist with our family BBQ? (We require help with setting up, food prep, and cleanup.)	<input type="checkbox"/> Yes <input type="checkbox"/> No

www.CalgaryApraxiaParentsExchange.ca



**Calgary Apraxia
Parents Exchange**