



This is to give permission for photographs of the camp participants including my child to be used in publications and or newspaper articles for the purpose of advertising or public information about the Nature Camp. Names would not be released with any photos.

Signature of Parent/Guardian: _____ Date: _____ (YYYY / MM / DD)

May we share your name, address & phone with others interested in carpooling? Yes No

For information and an application form for the Gananoque/TLTI Positive Opportunity Partnership for Kids Programme, (POP), visit <http://www.fabnaturecamp.weebly.com>

Registration Enquiries – 613-382-7381

For Office Use Only

of Weeks _____ x \$150.00 = \$ _____ (Total)

Deposit \$ _____ Balance \$ _____

Method of Payment: Cash Cheque Receipt Issued

Confirmation Sent: Date (MM/DD/YYYY) _____ / _____ / 2019

PAYMENT INFORMATION

Cost is \$150 / week / child.

Cheques only please; made out to FAB Nature Camp.

Refund Policy: \$25 fee if cancelled up to one week (7 days) before

