



## Kids Sports Camp 2018

July 2-6; July 9-13; July 16-20; July 23-27;  
July 30-Aug 3; Aug 6-10; Aug 13-17; Aug 20-24

### APPLICATION PROCESS

Please read the following carefully. *Summer Camp enrollment is first come, first served.* If you prefer to apply online, you can find a link to our online application at [www.loyalistcc.com](http://www.loyalistcc.com)

To apply by mail, please send us: **the program application**

### CONTACT INFORMATION

Mailing Address: PO Box 10, Bath, Ontario K0H 1G0

Website: [www.loyalistcc.com](http://www.loyalistcc.com)

Email: [admin@loyalistcc.com](mailto:admin@loyalistcc.com)

Phone: 613-352-5152 ext. 210

Fax: 613-352-5154

### WHEN TO SHOW UP AND WHAT TO BRING

Camp is Monday-Friday, 8:00am-4:00pm. Camp provides all the necessary equipment, and instructors, as well as a snack in the morning, lunch and snack in the afternoon. Campers should wear comfortable clothing and close-toed shoes, and a water bottle is highly recommended. They should also bring, a hat, sunscreen, bug spray, bathing suit, towel and any swimming devices required.

### COMPLETING YOUR APPLICATION

**Include the following:**

Program application

**Checks should be made out to:** Loyalist Golf Course

**If by Credit Card please fill out:**  Visa  Mastercard  Amex

**Name:** \_\_\_\_\_

**Number:** \_\_\_\_\_

**Expiry:** \_\_\_\_\_

**CVW:** \_\_\_\_\_

### Thank you so much for your interest in Camp!!

Any photos, recorded (audio or video) and written materials created for and/or during Sports Camp are property of Loyalist Golf & Country Club and may be used for promotional purposes at the discretion of Loyalist Golf & Country Club.

*The policy and intent of the Loyalist Golf & Country Club is to provide equal opportunity for all persons regardless of race, color, religion, national origin, ancestry, marital status, political affiliation, affectional orientation, sex, status with regard to public assistance, disability, age, veteran status, and any other status protected under federal, state, or local laws. We promote respect and do not tolerate racism, sexism, homophobia, or other discriminatory behavior or expression.*

**[PLEASE KEEP A COPY OF THIS PAGE FOR YOUR RECORDS]**

# Loyalist Sports Camp 2018

FOR OFFICE USE ONLY  
D8 rc'd \_\_\_\_\_ prc'd by \_\_\_\_\_

## Program Application (Thanks for printing legibly or typing!)

### 1. CHOOSE A SESSION

- Circle the session you wish to attend, if choosing for daily, please make note of which days are preferred.

\_\_\_\_\_ Session 1: July 2- 6    \_\_\_\_\_ Session 2: July 9-13    \_\_\_\_\_ Session 3: July 16-20  
\_\_\_\_\_ Session 4: July 23-27    \_\_\_\_\_ Session 5: July 30 - August 3    \_\_\_\_\_ Session 6: August 6-10  
\_\_\_\_\_ Session 7: August 13-17    \_\_\_\_\_ Session 8: August 20-24

If Daily – please specify which dates: \_\_\_\_\_

### 2. CAMPER AND PRIMARY CONTACT INFORMATION

Name of Student: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Age(at the time of Camp): \_\_\_\_\_  
Name you prefer to be called (if different): \_\_\_\_\_  
Name of Parent/Guardian/Primary Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone \_\_\_\_\_  
Email address you check frequently: \_\_\_\_\_  
Best way to contact you? (circle one)    **Home Phone**                      **Cell Phone**                      **Email**

### 3. EMERGENCY CONTACTS (please provide two additional people, different from the parent/guardian listed above, who would automatically be the first person we contact)

First Contact's Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ext \_\_\_\_\_

Second Contact's Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ext \_\_\_\_\_

### 4. SAFETY INFORMATION (please list all known conditions so we can accommodate your camper's needs)

Does your camper have any medical conditions, allergies, or special needs the staff should know about?

\_\_\_\_\_  
\_\_\_\_\_

**[PLEASE INCLUDE THIS PAGE IN YOUR APPLICATION]**

Does your camper have any behavioral or emotional issues the staff should know about?

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Is your camper taking any medications to treat these conditions?

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Is there anything else you would like us to know?

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**To complete your application; please send these pages:**

Loyalist Golf & Country Club  
PO Box 10  
Bath, ON K0H 1G0

Your payment will be processed by credit card the Friday before your child begins camp.  
Sincerely, Lacy, Office Administrator, 613-352-5152, [admin@loyalistcc.com](mailto:admin@loyalistcc.com)

**[PLEASE INCLUDE THIS PAGE IN YOUR APPLICATION]**