



**Ritmika**  
Rhythmic Gymnastics Club

**Summer**  
**CAMP**  
**2009**



REGISTRATION FORM

Please use a separate form for each child

**Participant information**

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
(D,M,Y)

Sex: M/F Age: \_\_\_\_\_ Healthcard #: \_\_\_\_\_

Address: \_\_\_\_\_  
Number/street apt. City postal code

Home Telephone: \_\_\_\_\_

Are there any medical or special needs you would like us to know?

\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Bus. Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

**Emergency contact Information:**

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

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

\*\* Fees: \$ 250 per week (9:00am-4:00pm);  
\$ 150.00 half a day (9:00am-12:00pm or 1:00pm-4:00pm)  
\$15.00/per child-before and after care

July 6-10

July 13-17

July 20-24

July 27-31

Aug 3-7

Aug 10-14

Aug 17-21

Please check off week attending

\*\*Fees are payable by cash or cheque.

Make your cheque payable to "RITMIKA R.G. Club" and mail it to:

*Ritmika R.G. Club*

*361 Four Valley Drive, Unit #3*

*Concord, Ont. L4K 5Z3*