



PD Days are from 8:30 am - 4:30 pm
Please bring lunch, a water bottle, and indoor shoes! Snack is provided.

PD Day Camp Registration Form

Child's Name: _____ Age: _____ Grade: _____ School: _____

Physical/Intellectual/Social/Emotional Identifications: _____

How can we best support your child: _____

Parent/Guardian Name(s): _____ Address: _____

Phone (Home): _____ Phone (Work): _____

Phone (Cell): _____ Email: _____

Do you consent to receiving emails from Parkwood Gardens Neighbourhood Group? YES NO

An emergency contact must be someone living in a different household than the child listed above and must have a different contact number than those listed above.

Emergency Contact: _____ Phone: _____

Permissions:

- 1) My child's photo can be taken: Yes No **Photos may be used on the PGNGs website or social media**
 - 2) My child is allowed to sign themselves out of the program: Yes No
 - 3) I understand there will be a \$5.00 fee for late pick-up: Yes No
- Other than listed parent(s)/guardian(s), who are authorized to pick up your child:
- _____

PD Days In 2019/2020

Date : \$25 per day	Extended Care:	Total
September 27 <input type="checkbox"/>	Yes: 8-5pm <input type="checkbox"/> No <input type="checkbox"/>	
November 1 <input type="checkbox"/>	Yes: 8-5pm <input type="checkbox"/> No <input type="checkbox"/>	
November 29 <input type="checkbox"/>	Yes: 8-5pm <input type="checkbox"/> No <input type="checkbox"/>	
January 21 <input type="checkbox"/>	Yes: 8-5pm <input type="checkbox"/> No <input type="checkbox"/>	
April 24 <input type="checkbox"/>	Yes: 8-5pm <input type="checkbox"/> No <input type="checkbox"/>	
June 5 <input type="checkbox"/>	Yes: 8-5pm <input type="checkbox"/> No <input type="checkbox"/>	

Date

Signature of Parent/Guardian