

WORKSHEET TO CALCULATE CAMP FEES

Please return with registration form and payment.

Family Name _____

1st Child's Name _____

2nd Child's Name _____

3rd Child's Name _____

CALCULATION OF CAMP FEES		1st Child	2nd Child	3rd Child	TOTAL
CAMP FEE	1st session - 4 weeks				
	3 weeks				
	2 weeks (limited- call office)				
	2nd session - 4 weeks				
	3 weeks				
	2 weeks (limited-call office)				
	8 weeks - special rate				
Less \$90*/wk if no bus transportation required					
Less Discounts					
Lunch Program (\$50/week)					
Horseback Riding Lessons (\$70/wk)					
Golf Lessons (\$55/week)					
Overnight (\$85/each)					
Refund Insurance Plan (\$10/week)					
TOTAL					

*Includes GST & PST.

OPTION 1: PAYMENT IN FULL- Full payment by Oct 25/19

Date: _____ Amount: _____

OPTION 2: REGULAR PAYMENT PLAN-\$375 deposit per child. Balance post-dated for April 1/20.

Date: _____ Deposit: _____

Date: _____ Balance: _____

OPTION 3: MONTHLY PAYMENT PLAN- \$375 deposit per child. Subtract deposit and divide balance into 6 equal payments dated: Jan 1, Feb 1, March 1, April 1, May 1, and June 1, 2020.

Date: _____ Deposit: _____

Date: January - June Payment: _____

Card Number: _____ Expiry Date: _____ CVC: _____

Cardholder Name: _____ Signature: _____