

SUMMER CAMP REGISTRATION 2026

CHILD'S INFORMATION		# Ludik: _____			
LAST NAME :	FIRST NAME :				
PAYER'S INFORMATION					
PAYER'S NAME (LAST NAME, FIRST NAME)	SOCIAL INSURANCE NUMBER				
ONLY FOR PAYING PARENT FOR TAX RECIEPTS (RELEVÉ 24)	S.I.N. MANDATORY BY THE MINISTÈRE DU REVENU				
ADDRESS (Paying Parent):	APT#:	CITY:			
DATE OF BIRTH (Paying Parent):					
POSTAL CODE:	E-MAIL:				
IMPORTANT! E-MAIL ADDRESS WILL BE USED TO SEND OUT CONFIRMATION, OUTSTANDING BALANCES, AND IMPORTANT DOCUMENTS.					
REGISTRATION (Grade your child is currently completing)					
<input type="checkbox"/> Group #1 - Kindergarten (5-6 yrs. old)	<input type="checkbox"/> Group #2 - 1 st grade (6-7 yrs. old)	<input type="checkbox"/> Group #3 - 2 nd grade (7-8 yrs. old)			
<input type="checkbox"/> Group #4 - 3 rd grade (8-9 yrs. old)	<input type="checkbox"/> Group #5 - 4 th grade (9-10 yrs. old)	<input type="checkbox"/> Group #6 - 5 th & 6 th grade (10-12 yrs. old)			
PROGRAM (includes Pizza lunch on Friday)					
WEEKS/DATES	REGULAR CAMP DAY (9am to 4 pm)	2 ND CHILD DISCOUNT (-10%)	3 RD CHILD DISCOUNT (-15%)	EXTENDED DAY (7 am to 6 pm)	TOTAL
1 – June 25th & June 26th	<input type="checkbox"/> 90\$	<input type="checkbox"/> - 9.00 \$	<input type="checkbox"/> - 13.50 \$	<input type="checkbox"/> +14\$	\$
2 – June 29th to July 3rd	<input type="checkbox"/> 225 \$	<input type="checkbox"/> - 22.50 \$	<input type="checkbox"/> - 33.75 \$	<input type="checkbox"/> + 35 \$	\$
3 – July 6th to July 10th	<input type="checkbox"/> 225 \$	<input type="checkbox"/> - 22.50 \$	<input type="checkbox"/> - 33.75 \$	<input type="checkbox"/> + 35 \$	\$
4 – July 13th to July 17th	<input type="checkbox"/> 225 \$	<input type="checkbox"/> - 22.50 \$	<input type="checkbox"/> - 33.75 \$	<input type="checkbox"/> + 35 \$	\$
5 – July 20th to July 24th	<input type="checkbox"/> 225 \$	<input type="checkbox"/> - 22.50 \$	<input type="checkbox"/> - 33.75 \$	<input type="checkbox"/> + 35 \$	\$
6 – July 27th to July 31st	<input type="checkbox"/> 225 \$	<input type="checkbox"/> - 22.50 \$	<input type="checkbox"/> - 33.75 \$	<input type="checkbox"/> + 35 \$	\$
7 – August 3rd to August 7th	<input type="checkbox"/> 225 \$	<input type="checkbox"/> - 22.50 \$	<input type="checkbox"/> - 33.75 \$	<input type="checkbox"/> + 35 \$	\$
8 – August 10th to August 14th	<input type="checkbox"/> 225 \$	<input type="checkbox"/> - 22.50 \$	<input type="checkbox"/> - 33.75 \$	<input type="checkbox"/> + 35 \$	\$
9 – August 17th to August 21st	<input type="checkbox"/> 225 \$	<input type="checkbox"/> - 22.50 \$	<input type="checkbox"/> - 33.75 \$	<input type="checkbox"/> + 35 \$	\$
10 – August 24th to August 28th	<input type="checkbox"/> 225 \$	<input type="checkbox"/> - 22.50 \$	<input type="checkbox"/> - 33.75 \$	<input type="checkbox"/> + 35 \$	\$
Annual membership fee \$19.50, if applicable					\$

Your child's spot will only be reserved once an administrative fee of \$50 per week has been received.

TOTAL	\$
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Cancellation and Reimbursement Policy

Before June 1st, a one-time 50\$ administrative fee will be applied for all cancellations and refunds. After June 1st, a **\$50 PER WEEK** administrative fee will be applied to any cancellations or refunds. Once the week begins, refunds will not be considered unless a medical certificate is provided. If a refund has been approved, the \$50 fee will be deducted and a prorated amount according to the number of days your child was present during the week will be issued. Absence from day camp does not constitute a withdrawal from the program. Cancellations or changes will not be accepted over the phone. You must complete a cancellation form in order for your request to be processed. Cancellations or changes are only accepted with a notice of 7 days before the start of the camp week you wish to cancel. If a credit option has been selected at the time of the cancellation, we cannot change the format to a reimbursement. To be able to register for camp, **ALL BALANCES from previous years must be paid**. Centre du Sablon reserves the right to ask campers not to return to camp at any point during the summer. Centre du Sablon day camp does not offer a 1:1 service. All campers must adhere to the camp code of conduct and group rules. Disrespectful or disruptive behavior, foul or hurtful language, violence and bullying will not be tolerated from campers or parents. **I CONFIRM THAT I HAVE READ, UNDERSTOOD AND AGREED TO THE ABOVE POLICY. PLEASE KEEP A COPY FOR YOUR RECORDS.**



CAMPER INFORMATION

CAMPER PHOTO

Ludik: _____

LAST NAME:	FIRST NAME:		
DATE OF BIRTH: YYYY/MM/DD	SEX: <input type="checkbox"/> M <input type="checkbox"/> F	MEDICARE:	EXP: YYYY/MM
FAMILY INFORMATION			
PARENTS' NAME (LAST NAME, FIRST NAME)	TEL. #1	TEL. #2	ALLOWED TO PICK UP CHILD
PARENT 1 :			<input type="checkbox"/> YES <input type="checkbox"/> NO
PARENT 2 :			<input type="checkbox"/> YES <input type="checkbox"/> NO
OTHER CONTACT INDIVIDUALS <i>We need to have 3 phone numbers on file (MANDATORY)</i>			
LAST NAME, FIRST NAME	RELATIONSHIP TO CHILD	TEL. #	ALLOWED TO PICK UP CHILD
1.			<input type="checkbox"/> YES <input type="checkbox"/> NO
2.			<input type="checkbox"/> YES <input type="checkbox"/> NO
3.			<input type="checkbox"/> YES <input type="checkbox"/> NO
MEDICAL & SWIMMING INFORMATION			
Children aged 4 to 6 years old will not be allowed to use floaties and must wear a life jacket due to their weight			
ALLERGIES :	EPIPEN : <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> CHILD KNOWS HOW TO SWIM	
MEDICATIONS :	<input type="checkbox"/> SHOULD SWIM WITH FLOATIE		
DIAGNOSIS: <input type="checkbox"/> ADHD <input type="checkbox"/> ASD <input type="checkbox"/> OPPOSITION OTHER:	<input type="checkbox"/> SHOULD SWIM WITH LIFEJACKET		
IMPORTANT INFORMATION :	If applicable, indicate the last swim level completed at CDS: Swimmer <input type="checkbox"/>		
CONSENT			
Sunscreen can be applied by counsellor.		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Camper can have their picture taken or filmed for promotional use on social media.		<input type="checkbox"/> YES <input type="checkbox"/> NO	
<ul style="list-style-type: none"> ➤ By declining this clause, I understand that my child will not appear in photos or videos taken by the CDS and will not be included in the weekly newsletter or end-of-summer video. To avoid accidental photos, children without photo consent will be asked to step out of pictures and wear an identifying bracelet when needed. 		<input type="checkbox"/> YES <input type="checkbox"/> NO	
I authorize Centre du Sablon to take the necessary measures to ensure the health of my child including application of EPIPEN if needed.		<input type="checkbox"/> YES <input type="checkbox"/> NO	

PARENT SIGNATURE

DATE

CAMP CODE

When I am at camp, I:

1. Respect the rules
2. Respect the staff, CITs, and the other campers with my actions or my words.
3. Respect the materials and neatly put them away after using them
4. Place all the garbage/recycling in the appropriate bin
5. Leave my personal toys or non-camp related objects at home, in order to fully enjoy the camp experience and avoid losing or theft of the object.
6. Bring my big smile and positive attitude to camp

Sanctions

The scale of sanctions presented here will serve as a guide for all day camp staff. Each intervention will be applied according to the nature of the situation and its severity (minor or major). The intervention may therefore deviate from the scale presented.

Degree of gravity: minor

Unacceptable actions: bad or inappropriate language, disobedience, insults, hustle & bustle, tantrums, refusal to participate, etc.

Escalations of sanctions:

1. Verbal warning
2. Discussion and search for concrete solutions with the counsellors
3. Removal of camper from an activity/outing
4. Meeting with the coordinator and phone call to parents depending on situation
5. Disciplinary notice and meeting with the parents
6. Suspension* for a day
7. Definitive expulsion* from camp

Degree of gravity: major

Unacceptable actions: physical violence, breaking of materials, temper tantrums or any acts compromising the security of others.

1. The camper is removed from the group
2. Meeting with the coordinator
3. Meeting with the parents
4. Depending on the gravity of the situation, disciplinary action or suspension* for one to three days.
5. Definite expulsion* from camp

EXPULSION OR SUSPENSION

- No reimbursement in event of suspension or expulsion
- All expulsions and suspensions are effective immediately.

The scale of sanctions presented here will serve as a guide for all day camp staff. Each intervention will be applied according to the nature of the situation and its severity. The intervention may therefore deviate from the scale presented.

I have read the Camp Code of Camp du Sablon and commit, as a parent, to support and encourage my child to abide by it.

PARENT SIGNATURE

DATE



SUMMER DAY CAMP 2026 – PREAUTHORIZED PAYMENT FORM

By the present, I authorize *La Corporation du Centre du Sablon* to charge my credit card on the date indicated with the amount marked below until I decide to cancel the present authorisation. I will inform Centre du Sablon of all changes regarding my credit card information above before the deadline of the next payment.

AN ADMINISTRATIVE FEE OF \$50/WEEK AND ANNUAL MEMBERSHIP OF \$19.50 WILL BE CHARGED UPON REGISTRATION FOR EACH CHILD. Please note that the \$50 administration fee is included in the weekly cost of the day camp.

DATE OF REGISTRATION _____ AMOUNT PAID \$ _____

<input type="checkbox"/> Wk. 0 June 25 & 26 2026	Balance: \$ _____	<input type="checkbox"/> Wk. 5 - July 27, 2026	Balance: \$ _____
<input type="checkbox"/> Wk. 1 - June 29, 2026	Balance: \$ _____	<input type="checkbox"/> Wk. 6 - August 3, 2026	Balance: \$ _____
<input type="checkbox"/> Wk. 2 - July 6, 2026	Balance: \$ _____	<input type="checkbox"/> Wk. 7 - August 10, 2026	Balance: \$ _____
<input type="checkbox"/> Wk. 3 - July 13, 2026	Balance: \$ _____	<input type="checkbox"/> Wk. 8 - August 17, 2026	Balance: \$ _____
<input type="checkbox"/> Wk. 4 - July 20, 2026	Balance: \$ _____	<input type="checkbox"/> Wk. 9 - August 24, 2026	Balance: \$ _____

I will use the following credit card: Visa* MasterCard *WE DO NOT ACCEPT VISA DEBIT

Card number: _____

Expiration date** (MM/YY): _____

CCV2 - 3-digit number (back of the card): _____

** Card must not expire before 09/2026

1. Child's name : _____

2. Child's name : _____

3. Child's name : _____

PAYER IDENTIFICATION (Print)

#Ludik: _____

Last name: _____ First name: _____

Address: _____

Postal code: _____ City: _____

Phone number: _____ Date of birth (YYYY-MM-DD): _____

Signature: _____ Date: _____

PLEASE SEE REGISTRATION FORM FOR CANCELLATION / REFUND POLICY