



# GEE-GEES CAMPS REGISTRATION FORM

Registration forms can be submitted by fax or mail beginning January 3, 2012. Registration can also be done online.

Registration forms can be submitted in person beginning May 1, 2012.

University of Ottawa, Sports Services  
125 University Street  
Montpetit Hall, room 102  
Ottawa, Ontario K1N 6N5 Canada  
Fax: 613-562-5151

### T-SHIRT SIZE

YOUTH	M	<input type="checkbox"/>	L	<input type="checkbox"/>
ADULT	S	<input type="checkbox"/>	M	<input type="checkbox"/>
	L	<input type="checkbox"/>	XL	<input type="checkbox"/>

### PAYMENT METHOD

Payments with installments are no longer accepted. In order to guarantee your registration in the chosen program(s), full payment and a completed registration/waiver form must be received.

<input type="checkbox"/> CASH <small>(no bills over \$50.00)</small>	<input type="checkbox"/> DEBIT	<input type="checkbox"/> CHEQUE <small>Payable to the University of Ottawa. A returned cheque is subject to a \$40 administration fee.</small>
<input type="checkbox"/> CREDIT CARD:	<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD

CARD NO.	EXPIRY DATE
CARD HOLDER	
SIGNATURE	

### CONSENT AND AUTHORIZATIONS

Does the participant have permission to leave camp on his/her own?  Yes  No

For the safety of all our campers, if you have answered **no** to the previous question, please list the name and relationship of the people who may pick up the participant.

NAME	RELATIONSHIP
NAME	RELATIONSHIP
NAME	RELATIONSHIP

**I AM AWARE** of the possibility of health and safety risks associated with my child's participation in the activities of the Camp. By registering my child, I HEREBY CONSENT to his/her participation in the activities AND I FREELY ACCEPT all health and safety risks associated with his/her participation. I will notify the University of my child's special medical condition or health history, if any. If the emergency contact person identified in this Form cannot be reached, and if my child has an accident or falls ill, I HEREBY AUTHORIZE the University to provide my child with, or make arrangements for, emergency medical treatment.

**I FURTHER AUTHORIZE** the University to take photographs of my child for identification purposes during his/her participation and for the Camp's promotional material, including the Gee-Gees website.

NAME OF PARENT OR LEGAL GUARDIAN	DATE
SIGNATURE OF PARENT OR LEGAL GUARDIAN	

### NOTES

Your personal information is collected under the authority of the *University of Ottawa Act*. It is collected for the purposes of recruitment, admission, registration, graduation, progression, administration, and other activities related to the University's programs and services. At all times, it will be protected in accordance with the *Freedom of Information and Protection of Privacy Act*.

If you have questions, please refer to <http://web5.uottawa.ca/admingov/privacy.html> or contact the University's Freedom of Information and Protection of Privacy Coordinator at [secruriv@uOttawa.ca](mailto:secruriv@uOttawa.ca) or at 613-562-5950

### ADDITIONAL INFORMATION

After receiving your registration, we will send you a confirmation e-mail and additional information.

### GENERAL INFORMATION

PARTICIPANT'S LAST NAME \_\_\_\_\_

PARTICIPANT'S FIRST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ PROVINCE \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

GENDER F  M  DATE OF BIRTH \_\_\_\_\_

HOME TELEPHONE NO. \_\_\_\_\_ HEALTH INSURANCE NO. \_\_\_\_\_

HEALTH INDICATIONS (i.e. allergies, restricted diets, disabilities) \_\_\_\_\_

LANGUAGE OF CORRESPONDENCE ENGLISH  FRANÇAIS

### PARENT OR MAIN CONTACT

NAME \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ HOME TELEPHONE NO. \_\_\_\_\_

CELLPHONE NO. \_\_\_\_\_ WORK TELEPHONE NO. \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

### CAMPS

1. CODE	COST \$
2. CODE	COST \$
SUBTOTAL = \$	
HST (IF APPLICABLE) \$	
GRAND TOTAL = \$	

**HST:** Applicable to age groups 14 years old and up. HST will be added to the cost of the camp where applicable.

**Refunds/Cancellations:** Your confirmation letter is required. A 10% administration fee will be deducted from the subtotal line in the "Camps and Activities" section. Partial refunds for daily absences will not be provided.