



2024
SUP n' SPLASH CAMP
REGISTRATION FORM (8-12yrs)



DATE REGISTERED: _____

LAST NAME	AGE
<input type="text"/>	<input type="text"/>

CAMPER NAME

LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____ CITY: _____ PC: _____

PHONE:(_____) _____ EMAIL: _____

AGE ON DAY OF CAMP: _____ BIRTHDAY: _____

SWIMMING ABILITY: VERY STRONG AVERAGE NEED MORE EXPERIENCE AFRAID OF

CONTACT PARENT NAME: _____ PHONE: _____

Select Camp Date (mark with 'x')

- Camp 1 - July 8, 9, 10 - 9am-12:00pm
- Camp 2 - July 29, 30, 31 - 9am-12:00pm

FEE FOR EACH CAMP: **\$155 plus GST only (5%)**

- SIBLINGS
1. _____
 2. _____
 3. _____

PAYMENT INFO:

- ONLINE STAFF INITIALS: _____
- IN-STORE STAFF INITIALS: _____
- TELEPHONE STAFF INITIALS: _____

** DETACH BOTTOM AND PRESENT TO CUSTOMER AFTER FULL PAYMENT IS RECEIVED **

KALAVIDA KIDS CAMP

778.475.5808 Email: staff@kalavida.com



DATE OF REGISTRATION

NAME(S): _____

- Camp 1 - July 8, 9, 10 - 9am-12:00pm
- Camp 2 - July 29, 30, 31 - 9am-12:00pm

WHAT TO BRING:

Kalavida Kampers should bring a swimsuit, sunscreen, hat, towel, water, snack, and lunch.

LOCATION: Kalamalka Beach

EQUIPMENT: Supplied by Twin Fish & Kalavida (including PFD's)

COMMENTS: _____