



加略山證道浸信會《兒童夏日學習營》

Vacation Bible School 2011
Calvary Logos Baptist Church

Camp Details

Date: August 8-19 (Mon-Fri, 2 weeks)
Time: 9 a.m. to 3:30 p.m. (with extended hours option till 6 p.m.)
Venue: Central Park Public School
Activities: Drama, Music, Crafts, Making Snacks, Media, Games, Sports, Movie...Lots of laughter and fun!!

Camp Costs

Early bird (before/on May 31):	<input type="checkbox"/> \$140.00	<input type="checkbox"/> \$120.00 (2 nd sibling)
Regular (after May 31):	<input type="checkbox"/> \$160.00	<input type="checkbox"/> \$140.00 (2 nd sibling)
Extended hours (extra cost):	<input type="checkbox"/> \$ 40.00	

**** Please bring your own lunch. The cost does not include lunch. ****

For More Information:

Please email us at vbs@calvarylogos.ca , or call us at 416-297-8787 (Tues-Thur, 10 am – 1 pm).

Payment Method:

Mail your completed form and cheque to:
Calvary Logos Baptist Church
241 Alexmuir Blvd, Scarborough, ON. M1V 2W6

Deliver your completed form with fee during
Office hours: Tue–Thu 10am–4pm

Limited enrolment. Early bird deadline is Tues, May 31st, 2011.

Last Name: _____ First Name: _____ Age: _____

Gender: Male Female Grade (in Sept 2011): SK 1 2 3 4 5 6

Street Address: _____

City & Province: _____ Postal Code: _____

Health Card #: _____ Contact Phone #: (_____) _____

Language: English Cantonese Mandarin Other: _____

Faith Background: My child attends church regularly for _____ years. My child does not go to church regularly.

Church Name (if applicable): _____

School Name: _____

Name of siblings also attend the camp: _____

Any allergies or dietary restrictions your child has? No Yes, they are: _____

Anything you want to tell us about your child that you believe we should know about? _____

Please check:

Early bird (before/on May 31) \$140.00 \$120.00 (2nd sibling)

Regular (after May 31) \$160.00 \$140.00 (2nd sibling)

Extended hours \$40.00

Parent Consent:

I, _____, give permission to _____ to participate in Vacation Bible School 2011 conducted by Calvary Logos Baptist Church and I agree that in the event of an accident or sickness, Calvary Logos Baptist Church, its staff, and its volunteers are hereby released from any liability. I also agree that in the event that my child conducts him/herself in a manner that is disruptive; s/he will be dealt with appropriately, including the possibility of contacting the parent(s) and /or sending the child home at my expense.

Parent/Guardian Signature: _____ Date: _____

Emergency / Day time Contact Number: _____ Email: _____

Office use only

Fee Received: _____ Date Received: _____

Staff Initials: _____ Registration #: _____