



Camper's Information

Name:		Email:
Phone Number:		Camper's Age (6-15):
Gender:	Female	
Address:		City and Postal Code:
Parent or Guardian'	s Information	•
Name:		Phone Number:
Email:		Other Notes:
àmp Dates (Camp F	ee: \$599 + HST) □ July 14-18	□ August 11-15
☐ Lunch Option (\$12 + HST per day)		
Dietary Information:		
	Social M	Vedia and Photos
11	, for social media postings,	eo content to be taken and used, in a respectable and website, and other promotional material.
Visa/ Mastercard #:		Name on Card:
Expiry Date:	CVD/CVS:	Signature:
I,upon purchase. Customer Signature	, authorize Ro Date	yal Stouffville Golf Club to charge my credit card above for the agreed
	o A Polera Aof Canada Class'A' – Tea	aching Professional

Please email completed registration form to Vito along with any questions you may have at: vpolera@royalstouffville.com