



Central Sockeye Summer Camp Summer Registration 2024

Parent/Guardian Name: _____ Phone: _____

Child's Name: _____ Grade: _____

Email _____

*Please check off which week/s or month you would like your child to attend and return to the office:

- July 2-5 Week 1 ***Outside games and fun!***
- July 8-12 Week 2 ***Water Fun-Field Trip to Spray Park***
- July 15-19 Week 3 ***Creative Fun-Field Trip to Chillibowl Lanes (cost:\$3)***
- July 22-26 Week 4 ***Hawaiian Theme!***
- July 29-Aug 2 Week 5 ***Cooking***
- Aug 6-9 Week 6 ***Around the world***
Field trip to Rotary Pool
- Aug 12-16 Week 7 ***Sports***
- Aug 19-23 Week 8 ***Emergency Services***

By signing below, I understand that my child is not considered registered for the dates listed above until I receive email confirmation of registration and have paid the **\$65 non-refundable registration fee.**

For office use only	
Program fees: _____	Date paid: _____
Deposit paid: _____	Date paid: _____

Parent/Guardian Signature: _____ Date: _____

CCECSS is a non-profit organization that relies on grants and donations. If you'd like to help run school year programming, please contact the office at 604-792-8539 or ccecscscoordinator@gmail.com. Thank you!