



CAFCA

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**CHILD AND FAMILY
 COUNSELLING ASSOCIATION**

Parliament Mews
 #5 - 230 Menzies Street
 Victoria BC V8V 2G7

Tween Summer Day Camps (ages 9 to 14) Parent Contract

Name of camper (first and last name)		Camper's date of birth	
Name of parent/guardian (first and last name)		Mailing address	
Home phone number	Work phone number	Cell phone number	
<input type="checkbox"/> Yes, I would like to receive CAFCA mailouts by email (enter address to the right)		Email address	

Meet at: West Shore Child, Youth and Family Centre 345 Wale Road, Colwood		Register for:	Need transport TO Camp:	Need transport FROM Camp:
		Please tick	Please tick	Please tick
Dates (12 to 5 p.m.)				
July 5 – 9	DC-66T	<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
July 12 – 16	DC-69T	<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
July 19 – 23	DC-72T	<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
July 26 – 30	DC-75T	<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Aug 3 – 6 (4 days)	DC-78T	<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
August 9 – 13	DC-81T	<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
August 16 – 20	DC-84T	<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
August 23 – 27	DC-87T	<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
August 30 – Sept 3	DC-90T	<input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Fees and Transportation:	Cost:
Five-day Day Camp (<i>excluding transportation</i>)	\$520*
Four-day Day Camp (August 3-6) (<i>excluding transportation</i>):	\$420*
Pickup transportation from Home to Camp (<i>Optional</i>):	\$12**
Drop-off transportation from Camp to Home (<i>Optional</i>):	\$12**

VISION: Bringing good things to life one child and one family at a time

ACCREDITED BY THE COUNCIL ON ACCREDITATION



Name of camper:	Name of parent/guardian:
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* Please note that MCFD Autism funding may be used to pay for these Day Camps as they are designed specifically for children and youth with Autism Spectrum Disorder.

****Transport fee is \$12 per trip if distance is 12km or less. An extra \$1/km may be charged depending on the distance from camp collection point**

The Tween Summer Day Camp starts and finishes each day at the West Shore Child, Youth and Family Center on Wale Rd, Colwood. This is a safe and secure location and will assist the campers with the transition to each daily activity in the community. The staff to camper ratio is 3:1, which will allow for maximum child participation and social development.

I acknowledge that:

- CAFCA camp staff are Autism Interventionists, are employees of CAFCA and receive their direction, supervision and training from CAFCA. I am aware that CAFCA Autism Interventionists have a recent criminal record check and thorough reference checks.
- I have received the booklet *Introduction to CAFCA: Autism Services*, which details my rights as a user of CAFCA’s Autism Services. I also acknowledge that I agree with guidelines for my child’s participation in a CAFCA Day Camp as described in the document *Autism Services Day Camps: Participation with a 1:1 support worker*.
- the above fees purchase my child’s access to participation in the above service. I acknowledge that these fees are refundable in full until twenty one (21) days before the service is scheduled to begin. After this date, fees are non-refundable unless CAFCA cancels the service, in which case I will be credited or refunded for the pro-rated value of the services cancelled by CAFCA.

This contract is:

- accompanied by a cheque or money order to cover the cost of services identified above; or
- covered by an existing MCFD authorization for the services identified above; or
- accompanied by a new Request to Pay form for the services identified above; or
- prepaid or covered by a credit currently on my account.

Signature of Parent or Guardian

Date

For more information on Day Camps, please contact Brad or Dan at (250) 595-4423 or brad@cafca.ca or dan@cafca.ca

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