



Irish Summer Camp 4 Kids 2024 Registration Form

*Early Registration RATE: \$200 per child

NORMAL RATE: \$225 per child per week

Other discounts available, about them!



Which camp you would like your child(ren) to attend;

Jul 22 - 26 - Leander Boat Club, 50 Leander Dr. Hamilton

July 29 - Aug 2 - St. Edward the Confessor - 75 Churchill Ave., Toronto North

Aug 5 - 11 - Goderich Celtic Roots College and Festival

Aug 12 - 16 - Mississauga Irish Supporters Club, 4120 Ridgeway Dr. Unit 39. Mississauga ☐

Aug 19 - 23 - Pegasus, 361 Glebeholme Blvd. - Toronto East End

Aug 26 - 30 - Lambton House - 4066 old Dundas St. - Toronto West End

Our Hours : 9:00am until 4:00pm In case of emergency call 647-338-1054

Sponsored by the Irish Canadian Cultural Society (Pot of Gold Grant)

Do you give permission for your child(ren) to have pictures taken to be used for promotion of the camp, on our website, social media and for our archives? Yes ☐ No ☐

Are you interested in continuing any of the activities?

If yes, please specify: _____

How did you find out about the camp:

Please check if you have any experience in:

Irish dance ☐ song ☐ Irish language ☐ football ☐ music ☐ Other ☐ specify _____

You will need to have a D tin whistle.

You will need to have a **D tin whistle**.

If you require us to purchase one please indicate:

Yes _____ No _____

Have you attended the camp before?

Yes _____ No _____

Has a member of your family ever attended the camp before?

Yes _____ No _____

Discounts for Comhaltas members and families

EVERYONE WELCOME!

Sponsored by the Irish Canadian Cultural Society (Pot of Gold Grant)

*Early registration ends March 17th.

Student Details

Student's Name:			
Date of Birth:	/	/	(dd/mm/yyyy)
Age:			
Special Interests:			
Parent/Guardian Name		Person's name who will drop off/collect Name	
Contact Details			
Street Address:			
City:		Postal Code:	
Home Phone #		Work # ()	
Mobile Phone		Fax # ()	
Email Address:			
In case of Emergency			
Emergency Contact Name:		Phone	
Hospital Card Number:		Allergies:	
Medication or any other Health Concerns: (please state)			

Are you interested in continuing any of the activities? Yes No

If yes, please specify:

How did you find out about the camp:

Would like to be notified about any other events associated with the following (please tick) Comhaltas
Irish Events Irish Summer Camps Dancing & Ceilis

DATE: _____ **Signature:** _____

Please note: Bring lunch (except on Friday) and wear comfortable clothes

For more information, contact Maureen Mulvey,

Home 416-446-6993 e-mail moleary2001@rogers.com www.irishsummercamp4kids.com

Hours will be given to energetic, hard working high school students looking for a fun way to complete their required volunteer hours for high school.

*Please make cheques payable to Irish Summer School 2040 Don Mills Rd, #509, Toronto, Ont.
M3A-3R7 or email transfer moleary2001@rogers.com noting your name and your child's name.*