



Bonfield Summer Camp 2026

Phone: 705-776-2641

Website: www.BonfieldTownship.com

Email: officeclerk@bonfieldtownship.com

Steve Featherstone, Camp Director

Casandra Klooster, Recreation & Fitness Committee, Secretary

Camper Registration Information

Camper's Name *

Camper's Date of Birth *

Camper's Address (street name and street number) *

City *

Postal Code *

Camper's Phone Number

Parent/ Guardian Information & Pick-Up Authorization

Mother/Guardian's Name *

Mother/Guardian's Phone Number *

Mother/Guardian's Email Address

Mother/Guardian's Full Address (if different from Camper) *

Father/Guardian's Name

Father/Guardian's Phone Number

Father/Guardian's Email Address

Father/Guardian's Full Address (if different from Camper)

Authorized Pick Up Persons

Name *

Phone Number *

Name

Phone Number

Prices

Bonfield Resident

- July 13th to July 17th, 2026 - \$125
- August 10th to August 14th, 2026 - \$125
- Both Weeks - \$225

Non-Resident

- July 13th to July 17th, 2026 - \$150
- August 10th to August 14th, 2026 - \$150
- Both Weeks - \$250

Do you give Bonfield Summer Camp permission to share your child's photo on the Bonfield Summer Camp on-line platforms? *

- Yes
- No

How many children from the same household are you registering?

Staff initial and date below to authorize that all forms have been completed in full.

Emergency Information

Camper's Name *

Ontario Health Card# *

Doctor's Name *

Doctor's Phone *

Dentist's Name

Dentist's Phone

**Emergency Contact
(other than parent) ***

Home Phone *

Business Phone

Cell Phone

Health History and Personal Information

The more information you can provide, the better we can meet the needs of your child. This information will be used by the camp staff. If there is additional information of a sensitive nature, please feel free to send a separate letter marked "confidential" to the attention of the Camp Director. Whatever information you send to us will be treated with confidence and respect.

Vaccination: What is the approximate date of your child's last booster shot?

Is the Camper under any form of treatment for an illness, conditions or injury? *

Yes

No

If yes, please explain in detail treatment and medications to be used at camp.

History of Communicable Diseases and Approximate Dates

Please indicate the approximate dates of when the shot was received.

Chicken Pox

Measles

Mumps

German Measles

Scarlet Fever

Hepatitis

Mononucleosis

Other

Carries ANA kit *

- Yes
 No

Carries Epi-pen *

- Yes
 No

Carries Insulin *

- Yes
 No

Wears Medic-Alert *

- Yes
 No

Allergies *

- Yes
 No

Allergies

Drugs *

- Yes
 No

Drugs

Food *

- Yes
 No

Food

Insects *

- Yes
 No

Insects

Other Health Issues (please click all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Hypertension |
| <input type="checkbox"/> Bleeding/Clotting | <input type="checkbox"/> Epilepsy |
| <input type="checkbox"/> Kidney trouble | <input type="checkbox"/> Skin conditions |
| <input type="checkbox"/> Knee | <input type="checkbox"/> Back |
| <input type="checkbox"/> Injury | <input type="checkbox"/> Asthma |
| <input type="checkbox"/> Ear Infections | <input type="checkbox"/> Hearing |
| <input type="checkbox"/> Sight | <input type="checkbox"/> Emotional |
| <input type="checkbox"/> Behavioural | |

Does the Camper have dietary needs or restrictions (Vegetarian, Lactose Intolerant etc)

Needed Medications

Senior staff have permission to administer your child's medication if needed.

- Yes
 No

Senior staff have permission to administer Benadryl for allergic reactions.

- Yes
 No

Please add any special instructions

Please use the back of this page, or attach additional pages if needed. ALL MEDICATIONS MUST BE CLEARED AND CHECKED BY THE CAMP DIRECTOR PRIOR TO THE START OF EACH CAMP DAY!

Registration Process

- Registration forms are accepted on a first come first serve basis.
- If registering multiple children from the same family, please indicate on each form.
- Once your registration form has been received the Township Office will contact you via email with confirmation and payment details.
- Full payment is required to save the Camper's spot.
- Incomplete registrations will not be processed until missing information is completed in full.
- Cancellation: Refunds can be issued up to two weeks prior to the session's start date.

Payment Details

- Township Office: Debit, Credit, Cash or Cheque.
- Phone: Call the Township Office at 705-776-2641 and pay via credit card.
- Online: www.BonfieldTownship.com. Select: "Pay Online"
If choosing this option, use the following as a roll number 4826-000-000-00000-0000 (ensure to include the hyphens) After payment is made please send a confirmation email to officeclerk@bonfieldtownship.com and include the payment amount, Campers full name(s), and your name and phone number.
- E-transfer: webmaster@bonfieldtownship.com.
If choosing this option, please use "camp" in all lowercase letters for your security answer.

If you have any further questions, please call 705-776-2641 or email officeclerk@bonfieldtownship.com

Code of Conduct

Developing an understanding of and responsibility for individual potential and abilities includes accepting responsibility for individual actions. While under the leadership of skilled staff, the activities that your child will engage in as a participant at Bonfield Summer Camp may involve low-risk in choices made and any physical activity undertaken by the participant. As a condition of being allowed to participate in Bonfield Summer Camp, you warrant the participant is in good physical and mental health and that the participant shall not consume any substances which would impair the participant's senses at any time during the program. A Participant's possession or consumption of alcohol, tobacco products, illegal or harmful substances will result in immediate dismissal from the program. You agree that no refunds will be granted for participants dismissed from camp for possession or consumption of these substances. You agree that intentional participant behaviour that puts the camper or others at physical or emotional risk will result in immediate dismissal from the program at the discretion of Bonfield Summer Camp's Director. Expenses incurred because of program dismissal will be the responsibility of the participant/parent/guardian.

The Township of Bonfield is not responsible for any bodily injury/death, loss or damage to personal property suffered by the participant either before, during or after the program; unless such injury is the direct and sole result of proven negligence on the part of the Township of Bonfield. The safety of each individual is of the utmost importance to us. In order to ensure the safety and well-being of all participants, the Township of Bonfield reserves the right to alter the program at any time without compensation to participants, parents/guardians. In registering, I am permitting my child to attend Bonfield Summer Camp. I, the undersigned parent or guardian, have provided a complete health history and permit my child to participate in the full range of camp activities, except as noted in the provided camper information. In the event of accident, injury or illness, I authorize the Camp Director and his/her designates to authorize on my behalf all procedures, including admission to hospital and necessary treatment therein, injections, anesthesia and/or surgery, as he/she may deem essential for the care and well-being of the camper. Such action is to be taken only when immediate contact with the undersigned or any authorized emergency contacts cannot be made. I have read and understand the payment procedures. I have read and understand the code of conduct as detailed on this page. I agree that the health history record is correct to the best of my knowledge and the participant has permission to engage in all activities, except as noted.

Any further details that will help the Camper have an excellent experience?

**PLEASE RETURN COMPLETED REGISTRATION FORMS IN PERSON OR EMAIL TO:
OFFICECLERK@BONFIELDTOWNSHIP.COM**

Signature of Parent/Guardian

**Parent/Guardian Name
(printed) ***

Township of Bonfield Privacy Statement: We are committed to protecting personal information by following responsible information handling practices in keeping with privacy laws. We collect and use personal data in order to better meet your service needs, to ensure the safety of children in our care, for statistical purposes, to inform you about Bonfield Summer Camp programs or service in which you are registered, and to satisfy government and regulatory obligations.

Thank You for Submitting Your Registration for
Bonfield Summer Camp 2026