



Our Lady of Sorrows Eagles Summer Camp



Join us for one or two fun filled weeks of Reading, Writing, Arts, Sports and Science/Technology. Keep your Reading and Writing skills sharp even when school is out! Come and stay active through Sports and other fun physical activities/games. Come explore in Science and Technology and let your creativity flow in Art! Every day will be a different fun theme day, including Disney, Sports, Beach and much more!! Students can participate in a half day or full day for 1 or 2 weeks.

Summer Camp Details:

*All participants will receive a camp t-shirt and a pizza lunch on Friday

Week #1:

Students entering Kindergarten (2018) - Grade 5 (2013) in September 2023

Tuesday July 4th - Friday July 7th 9:00am - 3:00pm Cost: \$250.00

OR

Tuesday July 4th - Friday July 7th 9:00am - 12:30pm Cost: \$125.00

Week #2:

Students entering Kindergarten (2018) - Grade 5 (2013) in September 2023

Monday July 10th - Friday July 14th 9:00am - 3:00pm Cost: \$300.00

OR

Monday July 10th - Friday July 14th 9:00am - 12:30pm Cost: \$150.00

We are now accepting registrations and these camps are going to fill up fast! Camps are open to boys and girls who will be in Kindergarten to Grade 5 in September 2023. We are only allowed a limited number of participants, so registration is first come, first serve. Please return registration and payment to the Our Lady of Sorrows office.

Deadline to register is Friday April 28th, 2023.

We are looking forward to lots of summer fun!!!

Sincerely,

OLS Camp Staff

Camp Participant Information

Last Name: _____ First Name: _____

Birth Date: _____ Grade in Sept 2023: _____
Year/Month/Date

Home Address: _____

Please circle T-Shirt Size:

Youth X-Small Youth Small Youth Medium Youth Large Youth X-Large

Please check which camp(s) child will be attending:

_____ July 4th - 7th 9:00am-3:00pm \$250 _____ 9:00am - 12:30pm \$125

_____ July 10th - 14th 9:00am - 3:00pm \$300 _____ 9:00am - 12:30pm \$150

Total Amount: _____

Cash or Cheque (payable to Our Lady of Sorrows)

Food Allergies/Medical Conditions:

Parent/Guardian Contact Information

Last Name: _____ First Name: _____

Home Address: _____

Cell #: _____ Work #: _____

I hereby authorize my child _____ in Grade _____ to participate in the Our Lady of Sorrows Summer Camp. My child is attending this of his/her own free will and I hereby release Our Lady of Sorrows Parish, Our Lady of Sorrows School and Education Committee, members of its staff and its officials from any liability in connection with the Summer Camp.

Parent Signature

Date