

2010 BCPWSA Summer Camp Form

Please note: Application for camp reimbursement must be in to the BCPWSA office 8 weeks prior to the BCPWSA child attending camp.

Date: _____

Date received at the BCPWSA office _____

I would like to apply for \$ _____ for my son/daughter (name)

_____ to attend _____ camp

from _____ 2010 to _____ 2010.

_____ I paid my 2010 BCPWSA membership by January 1st, 2010, and I am a member in good standing.

_____ I have included the receipt from camp and would like to be reimbursed.

_____ I would like the BCPWSA to forward the amount mentioned above to :

Camp: _____

I understand I will be notified, within two weeks of the receipt of this request, as to what funds will be allocated to my child's camp request.

I also understand that making a false claim will ruin my standing with the BCPWSA.

Parent/guardian signature _____ Date _____, 2010

Address _____

Please mail application forms to :
Catherine Nickerson 2129 Lillooet Cr. Kelowna, BC V1V 1W3