



UNICORN
DAY CARE

2025 SUMMER CAMP PRE-REGISTRATION

CHILD'S NAME _____

BIRTHDATE _____ / _____ / _____
D M Y

SEX: M ___ F ___

PARENT / GUARDIAN NAME _____ WK. PH# _____

EMAIL: _____ CELL # _____

ADDRESS _____

POSTAL CODE : _____ HOME #: _____

Allergies / Special Diet or Needs: _____

THE WEEK(S) THAT MY CHILD WILL BE ATTENDING UNICORN DAY CARE SUMMER CAMP

Please indicate the category you require: **JK/SK** \$110.00 per week **School Age** \$326.00 per week

Please indicate the week(s) you wish to attend: **Daycare Hours: 7:30 am until 6:00 pm**

- * **Week 1:** June 30 – July 4
- Week 2: July 7 - July 11
- Week 3: July 14 - July 18
- Week 4: July 21 - July 25
- Week 5: July 28 - Aug 1
- * **Week 6:** Aug 4 - Aug 8
- Week 7: Aug 11 - Aug 15
- Week 8: Aug 18 - Aug 22

* Closed July 1st Canada Day and August 4th Civic Holiday.

Total number of weeks attending: _____ **Parent/Guardian Signature:** _____

Payment is due in full with your application.
Weeks are non-transferable and there are no refunds.

Please mail in or drop off your application along with your payment to:

UNICORN DAY CARE
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www.unicorndaycare.com