



## ESL CAMP REGISTRATION FORM

### Student Information

First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_

Birthdate: Y \_\_\_\_\_ M \_\_\_\_\_ D \_\_\_\_\_ Age: \_\_\_\_\_  
Gender: ☐ Male ☐ Female Entering Grade: \_\_\_\_\_  
Country of origin: \_\_\_\_\_

### Parental Information

#### Father's information

First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Marital Status: ☐ M ☐ D ☐ W  
Lives with student: ☐ Yes ☐ No  
Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_\_) \_\_\_\_\_  
Work: (\_\_\_\_\_) \_\_\_\_\_ Ext: \_\_\_\_\_

#### Mother's information

First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Marital Status: ☐ M ☐ D ☐ W  
Lives with student: ☐ Yes ☐ No  
Phone: (\_\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_\_) \_\_\_\_\_  
Work: (\_\_\_\_\_) \_\_\_\_\_ Ext: \_\_\_\_\_

### Address

#### Home Address

Apt.# \_\_\_\_\_ Street: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Province/State: \_\_\_\_\_  
Country: \_\_\_\_\_

#### Mailing /Other Address

*Complete only if different from home address.*

Box # \_\_\_\_\_ Street: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Province/State: \_\_\_\_\_  
Country: \_\_\_\_\_

### ESL Camp Selection

**2026 Winter Flex Camps** - Dates\*: January 5 – February 20, 2026.

- ☐ Winter Camp - 7 weeks  
Winter Camp - 4 weeks  
Winter Camp - 2 weeks

**2025 Summer Camps**

Summer Camp July 21 – August 15, 2025.

**\*Flex Dates** - please state dates you want to attend:

\_\_\_\_\_ to \_\_\_\_\_

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## ESL Proficiency Level

- ☐ **Beginner** - Does not understand or speak English with the exception of a few isolated words or expressions.
- ☐ **Intermediate** - understands and speaks conversational English without apparent difficulty, but understands and speaks with some hesitancy.
- ☐ **Advanced** - reads, writes, speaks and comprehends English proficiently.

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## Medical Information

Does the applicant have any mental, emotional, physical limitations, or learning disabilities that may affect his/her activities or progress, or for some reason should be known by his/her camp leaders?

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Please specify if your child has any allergies.

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Specify if your child requires regular medication to be administered at camp.

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## More Information

Please provide information about yourself and why you want to come to Canada to study ESL. In several sentences, provide information about you (your family, where you live, things you like to do, favourite school subjects, etc.) Please answer in English.

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## Conduct Agreement

- ☐ I understand that Sussex Christian School has organized this camp experience to be both an educational and enjoyable experience. As such, campers are required to participate in all camp classes and activities as scheduled. Campers are to follow all rules outlined by the camp. Campers shall refrain from profane and vulgar language, the use of tobacco, alcohol and illegal drugs, and sexual activity. Upon failure to comply, a camper may be asked to leave the camp and return home at the family's expense.

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## Parental (Guardian) Signature

Signature of Father/Guardian

Signature of Mother/Guardian

Date

Date

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## Additional Documentation

*Please attach the following documents to this application:*

- ☐ A copy of the first page of your most recent passport, including your picture.
- ☐ Documentation for any ESL courses taken in your home country.
- ☐ Documentation for any ESL course results, standardized ESL test results, or English-related accomplishments.

\* Test scores (TOEFL, IELTS, etc.) are not required to enter an SCS short-term ESL program, but are helpful if available.