



## Payment Form

Please complete this form and forward it **by April 1, 2018** with payment, Recreational Activities Release Form, Medical Checklist(s); Teen Expectations Form and Allergy Management Form (if applicable) to:

Kate Abel  
398707 5<sup>th</sup> Line  
Melancthon, ON L9V 1S3

Please list the names of Campers/Counsellors/Support Staff/Squirts this payment form covers:

Camper Names: \_\_\_\_\_

Counsellor/Support Staff Names: \_\_\_\_\_

Squirt Names: \_\_\_\_\_

	#			
Number of Campers		X \$140	=	
				(To a Family Max of \$360 for 3 campers or more)
Number of Counsellors/SS		X \$50	=	
Number of Squirts		X \$15	=	
		Donation	=	
		TOTAL	=	

Please note the actual cost per camper is approximately \$170.  
Any donations to offset the actual cost are appreciated.

Please check off your method of payment:

### Canadian Residents:

- Cheque enclosed payable to Manitoulin Youth Camp
- Email transfer to [payment@christadelphianmyc.com](mailto:payment@christadelphianmyc.com)
- PayPal (please visit [christadelphianmyc.com](http://christadelphianmyc.com))

### U.S. Residents:

- Cheque enclosed payable to Manitoulin Youth Camp
- PayPal (please visit [christadelphianmyc.com](http://christadelphianmyc.com))

For financial assistance contact either:  
Bro. Ron Cooper (705) 859-3625 [rcooper@amtelecom.net](mailto:rcooper@amtelecom.net)  
Bro. Ken Styles (734) 525-9827 [kenstyles@juno.com](mailto:kenstyles@juno.com)