

New Membership

Renewal membership # \_\_\_\_\_

**Please Print**

Parent(s) /Guardian Name(s):

\_\_\_\_\_  
**Surname**

\_\_\_\_\_  
**Given Name(s)**

Street:

City:

Province \_\_\_\_\_

Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Local CPF Chapter/Section: \_\_\_\_\_

Occasionally the CPF membership list will be made available to other groups/agencies to offer members benefits or education-related information. Use of the list will be carefully regulated and only permitted under a contract specifying confidentiality and one-time authorization. If you do not wish to receive mailings other than directly from CPF, please check this box:

**MEMBERSHIP**

1 YEAR - \$25

3 YEAR - \$60

**FEES:**

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Fees are used by the chapters and province to support French as a Second Language.

**DONATIONS:**

Your gift in support of CPF is also welcomed.

Donors are recognized in 3 categories:

Benefactors - gifts of \$250 and more

Patron - gifts of \$100 to \$250

Supporter - gifts of up to \$100

Every donation is important to us. However, due to cost, receipts will be issued at the end of each year, for donations of \$10 or more. Thank you for helping (CPF Charitable Tax. No. 11883 5131 RR0001)

TOTAL: (GST Exempt) \$ \_\_\_\_\_

**For**

MasterCard

**Payment**

VISA

**by:**

Cheque enclosed

Card # : \_\_\_\_\_ Expires: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

# Grade 5 Core French Students

*Fun in French Camp*

*August 23<sup>rd</sup> – 25<sup>th</sup>*



## Get a Jump Start

for

Grade 6 Intermediate Immersion  
or just improve your Core French

*If more information needed please call:*

*Toll free 1-877-273-2800*

*Sponsored by:  
Canadian Parents for French  
New Brunswick*

## General Information

Canadian Parents for French-NB is offering a **3-day jump-start on French Camp** for students who are in the Grade 5 Core Program.

The camp will run from August 23<sup>rd</sup> to August 25<sup>th</sup> with qualified Bilingual university students as counselors who will be continuing their education in the fall.

The immersion camp will include exciting activities:

- Swimming
- Sports
- Games
- Campfires
- And much more!

The cost of the camp will be \$75 for 2002 members, \$100 for non-members.

If you can help at the camp with cooking or any duties in the kitchen and want to learn or practice your French, we take ***Parent Volunteers on trade!!***

*There is space to set up tents or trailer along the tree lines but no hook ups to electrical power.*

**Arrive time:** Friday between 1:00p.m. and 3:00p.m.  
**Pick up time:** Sunday between 1:00 p.m. and 3:00p.m.

*Please make cheque to: Canadian Parents for French and return with registration form to P.O. Box 4462, Sussex, NB E4E 5L6*

*Limited Spaces!! Confirmation and more information will be sent after receiving this registration.*

## Health History

Campers Name: \_\_\_\_\_

Age: (Dec 31/2002) \_\_\_\_\_ Grade \_\_\_\_\_ M  F

Does your child have problems?

visual: \_\_\_\_\_ hearing \_\_\_\_\_

Any allergies you know about? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please elaborate: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If your child has a specific health problem, what special care should be given in case of an attack? (example epilepsy): \_\_\_\_\_

\_\_\_\_\_

Name of Physician: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Medicare # \_\_\_\_\_

\*\* Please provide separate page if we need to know any other information. You can attach picture of your child (to be returned)

## Parental Consent Form

I give permission for my child \_\_\_\_\_ to take part in all activities organized at the camp.

\_\_\_\_\_

Date

\_\_\_\_\_

Parent signature