



UNIVERSITY OF TORONTO
FACULTY OF PHYSICAL EDUCATION AND HEALTH

OUTDOOR PROJECT 100H & 200H
REGISTRATION FORM

Outdoor Project you are enrolling in (✓):

- ODP100H1 – Introduction to Outdoor Projects \$250.00 Total (#9125)
 ODP200H1 – Advanced Outdoor Education \$250.00 Total (#9126)

Surname _____ Given Name(s) _____

Student Number _____ Male Female

E-Mail Address _____

Telephone Numbers - (Home): _____ (Cell): _____

Personal Information (confidential)

Health Insurance Number:

Special Dietary Requirements: No Yes

If **Yes**, please specify: _____

Swimming Ability Beginner Intermediate Advanced

Emergency Contact: _____

Telephone Numbers - (Home): _____ (Work): _____

Allergies (food or medical) / Medication Requirements / Special Conditions –
 Please indicate below:

Outdoor Projects are registered on a first come, first served basis. This form must be returned with payment no later than **August 15, 2008** to ensure that a space will be reserved for you. Payment by AMEX, Visa or MasterCard may be completed on the reverse of this form. Mail all completed forms to the following address: *BPHE Outdoor Projects, 55 Harbord St., Toronto ON, M5S 2W6*. Direct payment and cash can be accepted in person at the Membership Services Office.

If you are unable to attend the camp because of uncontrollable circumstances, please contact Darryl McSherry at (416) 978-2944 no later than two weeks prior to the departure date, in order to receive your refund minus the administrative charge (\$50.00). There are absolutely no refunds after the deadline. Camp fees cannot be transferred to future outdoor project.

Credit Card Method of Payment

- VISA
- MASTER CARD
- AMEX

If you wish to pay by credit card, you must authorize the Faculty of Physical Education and Health to debit your card. Please fill in the following information.

****I authorize the Faculty of Physical Education and Health, University of Toronto to debit my AMEX, VISA or MASTERCARD for the Outdoor Project fee****

Card number: _____ Expiry date: _____

Card holder's name as it appears on the card: _____

Card holder's signature: _____ Date: _____

Return this form along with your completed application:

By mail

BPHE Outdoor Projects
55 Harbord Street
Toronto, Ontario
M5S 2W6

By fax

Attn: Darryl McSherry
BPHE Outdoor Projects
416-971-2118

Notice of Collection - Freedom of Information and Protection of Privacy Act

The University of Toronto respects your privacy. The information on this form is collected pursuant to section 2(14) of the University of Toronto Act, 1971. It is collected for the purpose of administering the Outdoor Project courses offered by the Faculty of Physical Education and Health. At all times it will be protected in accordance with the *Freedom of Information and Protection of Privacy Act*. If you have questions, please refer to www.utoronto.ca/privacy or contact the University's Freedom of Information and Protection of Privacy Office at 416-946-5385, Room 201, McMurrich Bldg., 12 Queen's Park Crescent, Toronto, ON, M5S 1A1