



**GIRL GUIDES OF CANADA – EDMONTON AREA  
EVENTS REGISTRATION FORM**

Send form with fee by date specified to:  
Girl Guides of Canada Edmonton Area  
**3rd Floor, 11055 107<sup>th</sup> Street Edmonton AB T5H 2Z6**  
or email to [courtney@guidesedmonton.ab.ca](mailto:courtney@guidesedmonton.ab.ca)  
or fax to 780-453-1155. Payment **MUST** accompany  
Registration Form if mailed. Payment is to be made the  
same day as transmission if sent electronically.

**Name of Event:** Guide Friendship Camp

**Date of Event:** February 15-17 2019

**Applicant's Name:** \_\_\_\_\_

**Unit Name or District:** \_\_\_\_\_

**Preferred name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Full Mailing Address:** \_\_\_\_\_

**Health or Dietary Restrictions:** \_\_\_\_\_

**Additional Information requested for event:**  
\_\_\_\_\_  
\_\_\_\_\_

**Method of Payment**

Cheque (payable to Girl Guides of Canada)  Cash  Debit  Visa  Master Card

**Please call the Edmonton Area office to make payment by credit card. 780-451-2263**

Payments will be processed upon receipt.

**Cancellation Policy:** In the event of the participant cancelling her registration in this event up to three weeks prior to event, 75% will be returned to the applicant. No refunds will be made if cancellation is received within three weeks (twenty-one days) of the event, except upon extenuating circumstances; documentation may be required.

I myself, or, being the parent or guardian of \_\_\_\_\_  
request that I/she participate in the Event named on this application. I am aware of the  
registration fee cancellation policy. Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Name (print): \_\_\_\_\_