

Winter Address - November to April
 145 Renfrew Drive, Unit 112
 Markham, ON, L3R 9R6
 Tel: (905) 479-9388
 Fax: (905) 479-9313



Summer Address - May to October
 2400 Limberlost Road
 Huntsville, ON, P1H 2J6
 Tel: (705) 635-2491
 Fax: (705) 635-1601

summer@olympiasportscamp.com

2018 AIRPORT TRANSPORTATION FORM

ALL AIRPORT TRANSPORTATION MUST BE BOOKED IN ADVANCE
For Airline Arrival and Departure Campers Only

PLEASE COMPLETE THE INFORMATION BELOW AND RETURN WITH PAYMENT AS SOON AS POSSIBLE.

PLEASE PRINT CLEARLY

Camper's First Name _____ Last Name _____ Phone # _____

INDICATE WEEK(S) ATTENDING	PROGRAM NAME	INDICATE WEEK(S) ATTENDING	PROGRAM NAME
<input type="checkbox"/> Session 1: July 2-8	_____	<input type="checkbox"/> Session 6: August 6-12	_____
<input type="checkbox"/> Session 2: July 9-15	_____	<input type="checkbox"/> Session 7: August 13-19	_____
<input type="checkbox"/> Session 3: July 16-22	_____	<input type="checkbox"/> Session 8: August 20-26	_____
<input type="checkbox"/> Session 4: July 23-July 29	_____	<input type="checkbox"/> Session 9: August 27-Sept. 2	_____
<input type="checkbox"/> Session 5: July 30- Aug. 5	_____		

AIRPORT TRANSPORTATION			
AIRPORT FEE (includes HST)	\$145.00 one way	\$270.00 round trip	
Arrival:	From _____	Date _____	Time _____
	Airline / Flight # / Terminal _____		
Departure:	From _____	Date _____	Time _____
	Airline / Flight # / Terminal _____		
Other: _____			
*** PLEASE ATTACH A COPY OF THE TICKET WITH THE TRANSPORTATION FORM ***			

PAYMENT SUMMARY	
<input type="checkbox"/> Mastercard	_____
<input type="checkbox"/> Visa	_____
CARDHOLDER	Date _____
Name _____	Expiry _____
	Signature _____
	CVV _____
	TOTAL _____

The personal information collected on this form will be kept secured and confidential and will be used only for the 2018 summer session.