



Ontario Ringette Association

207 - 3 Concorde Gate
Toronto, Ontario. M3C 3N7
Telephone: 416-426-7204
Fax: 416-426-7359
Email: admin@ontario-ringette.com
www.ontario-ringette.com

Name of Camp: _____ Camp Date: _____
Location of Camp: _____ Phone at Camp: _____
Sponsoring Association or Region for Camp: _____
Camp Co-ordinator: _____
Contact Information for Camp Co-ordinator prior to and after camp: _____

List of activities expected at camp - for both on-ice and off-ice:

Will dryland training be included: _____ Will there be a special instructor for goalies: _____

Will there be feedback given to the camp participants? interviews video written evaluations

List of expected Instructors:

Please attach a page (no more than 50 words) describing instructor's ice experience and background.

Do the Instructors have: Standard First Aid Emergency First Aid CPR

Should you require assistance with the set up of your Camp, please visit our website to contact the Chair of the Sport Development Committee.

Please complete and submit this form to the ORA office as listed at the top of this page, along with a \$15.00 registration/administration fee. Regular ORA insurance covers all registered camps.

Date Received: _____ Payment Received: _____