



THE JEWISH CAMP COUNCIL OF TORONTO

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CAMP NORTHLAND - HALIBURTON, ONTARIO K0M 1S0



An affiliate of



CAMP NORTHLAND ACCOMMODATION ASSISTANCE FORM

How can we better assist you with your needs? Camp Northland is committed to accessibility and all information and responses are handled with strict confidence. Please fill out this form in full in order for us to assist you appropriately.

Full Name: _____

Telephone Number: _____ **Email Address:** _____

Please check off any of the following that apply:

- | | |
|--|---|
| <input type="checkbox"/> Acquired brain injury | <input type="checkbox"/> Learning disability |
| <input type="checkbox"/> Attention deficit hyperactivity disorder (ADHD) | <input type="checkbox"/> Low vision, blind |
| <input type="checkbox"/> Autism spectrum disorder | <input type="checkbox"/> Mental-health related disability |
| <input type="checkbox"/> Chronic illness/systemic/medical | <input type="checkbox"/> Mobility |
| <input type="checkbox"/> Deaf, deafened, hard of hearing | <input type="checkbox"/> Other |

Please elaborate on the selected responses above so that we can assist and accommodate you accordingly:

Please submit this form by email to happycamper@campnbb.com or have it sent to 1118 Centre Street, Suite 202 in Thornhill, Ontario, L4J 7R9.