



Gatineau River Yacht Club

REGISTRATION INFORMATION

Please include all information for tax receipt (Releve 24) purposes.

PART A – COMPLETED BY PARENT or GUARDIAN

Name of each child enrolled in the Junior Program:

Child's Legal Last name	First name	Birth date (Year/Month/Day)

Name of person who is **claiming the child care expenses** for income tax purposes:

Legal Last Name	First name and initial

SIN Number – as required by Revenue Québec:

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Address:

Street:
City:
Postal Code:

PART B – Completed by Junior Program Administrator

Need for Tax purposes:

Name of child	number of days	Cost