

LAKESHORE'S SUMMER ADVENTURE CAMP 2014

CHILD'S FULL NAME: _____ age: _____

Starts July 7th to August 29th, 2014 (no camp August 4th due to civic holiday)

Monday - Friday: 9am to 4pm daily (extended hours 7:30pm to 5pm)

Location: Puce Sport and Leisure Centre

Please complete and fax, email or drop off application with payment(s) to Town of Lakeshore,

419 Notre Dame Street, Belle River, Ontario N0R 1A0, ATT: Recreation Services

Please note: \$25 admin fee charged if camp day/week cancelled

(Circle days or check week)	M	T	W	T	F	Fully Trained in High Five Quality at Play Standards and First Aid/ CPR level 'C'	SENIOR CLUB 7-10 YEARS OLD <input type="checkbox"/>
<input type="checkbox"/> Summer Adventure Week	7	8	9	10	11		
<input type="checkbox"/> Around the World in 5 Days	14	15	16	17	18		
<input type="checkbox"/> Nature Notes Week	21	22	23	24	25		
<input type="checkbox"/> Safety Week	28	29	30	31	01		
<input type="checkbox"/> Community Project Week	--	05	06	07	08		
<input type="checkbox"/> Lakeshore's Got Talent Week	11	12	13	14	15		
<input type="checkbox"/> Celebrating the Holidays Week	18	19	20	21	22		
<input type="checkbox"/> Kids in Motion Week	25	26	27	28	29		

**Visit the Puce Sports & Leisure Centre or visit www.lakeshore.ca to register
Registration forms are online or contact Recreation Services at (519) 727-0470**

REGISTRATION FEE: \$135.00 weekly or \$35 per day per child

CASH-DEBIT-CREDIT PAYMENTS ONLY

Please Note: REGISTER EARLY TO AVOID DISAPPOINTMENT

WEEKLY REGISTRATIONS MUST PRE-BOOK PRIOR TO JUNE 30TH

DAILY REGISTRATIONS - BASED ON AVAILABILITY ONLY

Maximum Capacity: 50 Children Per Day - NO CAMP AUG. 4, CIVIC HOLIDAY

The registration fees are due upon registration. No refunds will be considered for non-participation once registration forms are submitted and paid for. Children must remain in the program location until end of day pick up unless the leaders are provided with written authorization from the parent/guardian for release. **Daily sign in and sign out procedure is mandatory** for all children (**parent must come into program location**). Scheduled field trips are not mandatory but if high response of attendance is evident, no staff will remain on site for children not wishing to participate. All children are expected to be active participants in the summer camp program, unless advised otherwise by parent/guardian. In order for the program to be a success, it is very important that the leaders have the cooperation of all children.

Behavioural problems will be dealt with as follows:

1. If a child is found to be continuously disruptive and will not participate in scheduled activity, the Parent/Guardian will be notified at the day's end.
2. If misbehaviour is repeated after the above efforts have been exercised, the child will not be allowed to return to the program

UNCONTROLLABLE BEHAVIOUR, BULLYING OR WILLFUL HARM TO OTHER CHILDREN AND/OR PROGRAM LEADERS WILL NOT BE TOLERATED. THE CHILD WILL BE SUSPENDED IMMEDIATELY AND NO REFUND ISSUED.

By everyone working collaboratively, the activities can be memorable & safe for both children and program leaders!

I have read the above and I am aware of the terms and conditions set forth in the above.

DATE: _____ **Name of Parent/Guardian:** _____

Signature: _____

Junior Fun Club – Ages 4 – 6

Senior Fun Club – Ages 7 – 10

Child's Name: _____ Birthdate _____ Age: _____

Full Address _____ Home Phone: _____

Emergency Phone # _____ /cell: _____

Parent's/Guardian's name: _____

DOES YOUR CHILD HAVE ANY ALLERGIES (FOOD RELATED OR ENVIRONMENTAL AND/OR MEDICAL CONCERNS/NEEDS/MEDICATION): yes _____ none _____

(Impairment/Disabilities): yes: _____ none: _____

Ontario Health Insurance card # _____ (for injuries/sickness requiring emergency response, 911 will be called immediately and parent notified immediately)

For non-emergency injuries/sickness, parents will be notified by phone by Supervisor in charge.

PEANUT ALERT!!- No peanut products please. We are asking that no peanut products be brought to the program in lunches or snacks.

Is an adult home while your child is participating in the program:

Yes _____ No _____

If not, is there a home your child can go to in case of program closure, behavior problems or an emergency that may arise:

Name:	Address:	Phone No.:

***Please note-all activities that involve leaving the premises such as a scheduled field trip will require a separate authorization form completed by all participants. All field trip costs are separate from registration fees including admission and transportation.

Please note: From time to time, staff do take **photos of the children** and post in program locations for view and on occasion for publication in Lakeshore's promotional materials. Please advise if you wish to refrain from this exercise by signing here _____.

The above mentioned child has my permission to attend Lakeshore's Summer Adventure Camp. I will provide his/her transportation to and from the program. The above mentioned child will remain in the program area until the specified time unless supplied with written permission of the undersigned (submit note stating early departure and/or other arrangements for pick up including name and relation of individual who will be responsible for pick up). **All parents/guardian must be present to sign in and sign out during your child's stay.**

It is also understood that the participants will be properly supervised and that reasonable safety precautions will be taken.

I am also aware that there are always risks associated with any physical activities resulting from my child participating in the program. Having knowledge of these risks and in being allowed to participate in the program, I hereby assume all risk of injury, damage and liability arising from such activities or use of any equipment and hereby release the Town of Lakeshore, its officials, employees and agents and waive any right of recovery I might have to bring a claim or lawsuit against them for any personal injury, death or other consequence occurring to my child/children as a result of their voluntary participation in the activities being registered for.

Date: _____

Signature of Parent/Guardian