



# Old Ottawa East Community Activities Group (CAG) Groupe d'activités communautaires du Vieil-Ottawa-Est

## CAG SUMMER CAMP 2017 Enrollment Form

Please complete a separate form for each child attending. This information is personal and confidential and will only be used by staff of the Community Activities Group of Ottawa East (CAG) to ensure that proper care and attention is given to the health and safety of your child.

Please indicate each of the camps that your child is attending with a check mark in the appropriate box:

Jump Start Summer, Jun 26 - 30		Camp Brantwood, July 21 - 25	
Canoe Kids, Jul 4 - 7		Kinder Camp, Aug 8 - 11	
Canoe Kids, Jul 10 - 14		Nature and Art Camp, Aug 14 - 18	
Canoe Kids, Jul 17 - 21		Camp Brantwood, Aug 21 - 25	
Canoe Kids, Jul 24 - 28			

### Participant Information:

Full Name of Participant:	
Email address:	
Gender:	Date of birth:
Home Address:	
Second Home Address (where applicable):	

### Parent / Guardian / Emergency Contact Information

Parent /Guardian Name	Parent /Guardian Name:	Emerg. Contact Name:	Emerg. Contact Name:
Relationship to Participant:	Relationship to Participant:	Relationship to Participant:	Relationship to Participant:
Home Telephone Number:	Home Telephone Number:	Home Telephone Number:	Home Telephone Number:
Work Telephone Number:	Work Telephone Number:	Work Telephone Number:	Work Telephone Number:
Cell Number:	Cell Number:	Cell Number:	Cell Number:

**Please circle the parent contact telephone number that should be called first if there is an emergency during camp hours, i.e. the parent contact number that is most likely to be reachable during these hours**

## Health / Special Needs Information

Is the participant taking any medication (please circle):		
YES	NO	If yes, please specify:
Does the participant have any life-threatening allergies? (please circle):		
YES	NO	
If yes, please specify below and complete the <u>Medication Administration Request Form</u> (we cannot accept your child into camp without this)		
Will your child need to take any medications during the course of their day at camp? (please circle):		
YES	NO	If yes, please complete a <u>Medication Administration Request Form</u>
Does the participant have any special conditions, which may impact their participation in the program? (please circle):		
YES	NO	If yes, please specify:
(If yes, additional information may be requested. Information provided will be held in confidence and will greatly assist us in giving your child the best possible camp experience)		

## Pick up information (Please list who is allowed to pick up the participant. Picture I.D. may be requested)

1.
2.
3.
4.
5.
If they may walk home alone, parent/legal guardian please sign and indicate earliest time they may leave:

## Photo Waiver

I hereby authorize and grant permission to the Community Activities Group of Ottawa East (CAG) to take the participant's photograph or video film and use it for promotional, educational purposes, or for any other administrative functions that are related to CAG programming.	
YES	NO
Parent/Legal Guardian-print your name:	Parent / Legal Guardian-sign your name :

## Consent & Waiver

### **CONSENT, RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT**

*Please Read Carefully.*

My child, a minor pursuant to the Age of Majority and Accountability Act, has my permission to participate in the above-described program/activity. As the parent/legal guardian, I and my child fully understand and have full knowledge of the nature and extent of the risks involved with my child participating in the above-described program/activity. I and my child agree to indemnify and hold harmless the above-described Community Activities Group of Ottawa East and the City of Ottawa liable from all claims, demands, causes of action, loss, costs or damages that the above-described Community Activities Group of Ottawa East may suffer, incur or be liable for in relation to any injury my child may suffer or cause to others in connection with my child's negligence or while my child is participating in the above-described program/activity. I and my child hereby release, waive, and discharge the above-described Community Activities Group of Ottawa East and the City of Ottawa from all liability to our heirs, executors, administrators, and assigns for all loss or damage and any claims or demands for such loss or damage on account of injury to person or property.

Furthermore, I confirm that I read and agree with the information provided on this form and have received the Conditions of Enrollment and I agree to abide by the terms and conditions outlined therein.

Parent/Legal Guardian (1) -print your name:

Parent / Legal Guardian (1) -sign your name :

Parent/Legal Guardian (2) -print your name:

Parent / Legal Guardian (2) -sign your name :

Date:

### **Conditions of Enrollment**

1. An Enrollment Form must be completed for each participant. If a participant suffers from severe allergies, parents or legal guardian must complete the Medication Administration Request Form, provide two auto-injectors of epinephrine (Epipen) and two clear, current photos of the participant.
2. Parents or legal guardians must notify Program Staff of any medical, physical and emotional health issues, or any special needs accommodations required at least two weeks prior to the start of camp.
3. I understand that if my child will require special assistance in order to meet conditions of enrollment I will provide an aide with prior agreement with CAG and according to CAG policy, otherwise all terms and conditions of enrollment apply.
4. Those authorized on the Enrollment Form to pick up the participant will be requested to follow the program's sign-out procedures. Staff will not release a participant to any person who is not authorized by the parent or legal guardian to do so. Participants walking to and from the program site will have their arrival and departure information recorded by a staff person.
5. Participants must be picked up by the advertised time and by those persons authorized to do so unless the participant has written consent on the Enrollment Form to walk home. Late pick up results in additional staff

costs and is unfair to Program Staff. CAG reserves the right to charge for late pick up at a rate of \$15 per 15 minutes or part thereof.

#### 6. Summer Camp Refunds

A refund request that would take registration below minimum numbers is only accepted up to two weeks prior to the start of camp as this would lead to camp cancellation.

A refund request that does not take camp below minimum numbers will be accepted up to two business days prior to the start of camp.

A prorated refund is available at any time on presentation of a medical certificate.

Partial refunds will not be issued for temporary absences from the camp.

All participant requested refunds will incur a \$25 admin fee per camp per registrant.

7. Parents or legal guardians are responsible for the participant upon arrival when picking up the participant.

8. Parents are required to supply a daily snack/lunch. CAG attempts to offer an allergen-safe environment, please do not send food that may contain peanuts, nuts, traces of nuts or nut by-products. From time to time, parents may be advised that, due to allergies of participant/participants, certain other foods may not be brought to the camp. In these circumstances, parents will be expected to follow such requests. Occasional food items to be shared (for example birthday treats) must be cleared with Program Staff in advance.

9. Participants are responsible for their own belongings. CAG shall not be responsible for loss or damage to property belonging to participants.

10. Participants are not to bring electronic devices, CD Players, toys or similar items unless approved to do so by staff.

11. All electronic equipment with photographic capabilities (including cellular telephones) are strictly prohibited.

12. Parents/guardians agree to pay for any and all damages intentionally caused by the participant to facility property and/or the property of others.

13. Illegal drugs, alcohol, or weapons are forbidden in CAG programs.

14. Participants are expected to respect other program participants, program staff, City of Ottawa and CAG property, and the property of other participants. They are expected to reasonably participate in camp activities. CAG reserves the right to immediately suspend or terminate the enrollment of any participant who does not abide by this guideline or who engages in other inappropriate or disruptive behavior.

15. Participants who are not following instruction for any reason and as such are perceived to present a safety risk to themselves or others may not be permitted to participate in some activities and their enrollment in camp may be terminated

16. All participants must comply with Federal, Provincial and Municipal laws and all rules, regulations, policies, procedures and by-laws of the City of Ottawa.

17. Non-compliance with the Conditions of Enrollment will result in a written warning. If the Conditions of Enrollment continue to be breached, CAG reserves the right to immediately discharge the participant without refund.