

Paradise & District Lions Summer Playground Registration 2019

Name of Participant: _____ DOB: _____ Gender/Sex _____

Address: _____ City: _____ Province: _____ Postal Code: _____

Health Card # _____

Parent/Guardian's Name: _____ Tel: (____) _____ Cell: (____) _____

Preferred Email: _____ Alt Email: _____

Parent/Guardian's Name: _____ Tel: (____) _____ Cell: (____) _____

(Address if different from above) _____

Preferred Email: _____ Alt Email: _____

Alternative Emergency Contact _____ Tel: (____) _____

Relationship to Child _____

WEEK 1 - July 8 - 12 _____ **WEEK 2 - August 12 - 16** _____ **WEEK 3 - August 19 - 23** _____

*(Please circle which week/s you are registering your child for) *

Registration Cost

\$150.00 per child/per week (10% discount for additional children from the same family)

4-day week due to Civic Holiday \$120.00

For Administration Purposes. _____ Paid _____ Registration Confirmed _____ Balance _____

Occasional Day Participants accepted at the discretion of the Playground Coordinator - \$30.00 per day

Method of Payment (payment or deposit must be made prior to the beginning of the scheduled camp)

Cash _____ Cheque _____

For other arrangements contact markparadiseanddistrictlions@gmail.com

Notice

Ontario Government's Minimum Wage Increase

*Please note the announcement of the Ontario Government to increase Ontario's minimum wage from \$11.40 to \$14.00 per hour in January 2018 will significantly affect summer camps.

This substantial wage increase will result in a corresponding increase in camp registration fees across the industry, especially for not for profit organizations such as the Paradise & District Lions Summer Camp.

Summer Playground 2019

Medical Information and Authorization

Name of Participant: _____

Birthday (dd/mm/yyyy): _____ Health Card Number: _____

Health Issues (including food or drug allergies, does the child wear a "Medical Alert" bracelet). Are there any allergies? Please specify: _____

Does the child take medication on a regular basis? _____

Medications Prescribed	Dosage	Time
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Possible Side effects: _____

Does the child have chronic medical problems that affect his/her behaviour or additional information we should be aware of? Please describe: _____

Medication Dispensing Authorization

As parent/guardian of the above-named child, I authorize the dispensing of the medication(s) listed below by the Paradise & District Lions Camp Staff who I acknowledge are not medically trained. I release the Paradise & District Lions Club, its members and Day Camp Staff from all manner of actions, causes of action, suits, losses, damages or injuries, however caused, arising out of the administration or failure to dispensing medication herein as a result of such actions or proceedings being commenced against them by myself or the child or any other parent/guardian of said child.

I am aware that all medications must be given to Program Coordinator in their original containers at camp drop-off.

Additional Individuals Authorized for Drop-off and Pick-up:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Authorization for Medical Treatment

In permitting my child to attend Day Camp programming created by the Paradise and District Lions Club, I, the undersigned, in the event of an accident or illness affecting the above child, authorize all procedures, including admission/transportation to the hospital & necessary treatment herein, as deemed essential for the care and well-being of said camper.

Such action is to be taken **only** when immediate contact with the undersigned or designated guardian cannot be made. I authorize the Paradise and District Club's program staff to perform immediate first-aid on the camper if necessary.

I _____ (please print) have read and understood the above policies regarding registration/cancellation, late pick-up, photo/release and authorization. I have taken care to explain any special considerations or medical information for my child, and authorize that all information provided is correct.

* Parent/Guardian Signature: _____ Date: _____

Lions Club Summer Day Camp Policies & Waiver

Registration/Cancellation:

- Registration is accepted on a first come-first served basis; registration on the day of the camp is not guaranteed and may be accepted at the discretion of the Program Coordinator
- **Occasional Day Registration may be accepted at the discretion of the Program Coordinator**
- Payment must be received at time of registration or no later than the first day of the camp
- Smart phone images/faxed copies of a form will not be accepted
- Cancellations must be received at least seven days prior to the camp in order to receive a refund
- If other financial arrangements are required, please contact the Lions Club Committee Representative brian.a.cunningham@rogers.com

Drop Off and Late Pick-Up:

- Please sign in your children upstairs in the Community Centre, 1 Green Street St. Clements
- Programming starts at 9:00 a.m. and finishes at 4:00 p.m.
- Children may be dropped off no earlier than 8 a.m.
- Summer Camp provides late pick-up if necessary from 4:00p.m. to 5:00 p.m. at no charge, but children must be signed out no later than 5:00 p.m.

Photo Release:

I authorize the Lions Summer Program Staff to take photographs and/or video of my children participating in a program and to use this media for promotional purposes, including print/electronic publications, without compensation to me. If you disagree with photos being taken please speak to the Camp Coordinator.

ATTENTION for the safety of your child and others attending the camp:

- **NO NUT PRODUCTS at camp due to life threatening allergies.**
- **Bring a nut free lunch, snacks, drinks, sun-screen, hat and bug spray each day.**
- **Running shoes are mandatory.**
- **MEDICATIONS to be taken at camp must be given to the camp coordinator.**

It is the intention of staff to provide a fun and safe program environment for your child. Summer program staff have been trained in a variety of behaviour management techniques to encourage positive behaviour and self-discipline.

The rules of program participation will be clearly outlined to participants as follows:

1. Keep your hands and feet to yourself
2. Speak nicely to each other
3. Touch only what belongs to you
4. Stay within the activity area
5. Listen to your leaders
6. Respect all staff members, other campers, and the camp equipment and property
7. Always stay with your group and your group counsellor
8. No foul language, fighting or aggressive behavior

Any child who does not abide by the program rules could have a 'time out' from a particular camp activity. A participant may also be dismissed from camp at any time if their behaviour is severe or flagrant and the child's parents/guardian will be notified and requested to pick up their child

* Parent/Guardian Signature: _____ Date: _____

*Please submit registration to:
Paradise & District Lions Club Summer Activities Camp
P.O Box 591
1 Green Street
St. Clements, ON
N0B 2M0

Please Do Not drop of Registrations at the Community Centre

For Information/Inquires contact: markparadiseanddistrictlions@gmail.com Tel: 519-699-5656