Child’s given name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Family name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_ Sex: M / F

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt: \_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal code: \_\_\_\_\_\_\_\_\_\_\_\_\_ Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Medicare card #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

D M Y

E-Mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Health requirements/concerns: Yes \_\_ No \_\_

Epilepsy \_\_Asthma \_\_Hyperactivity \_\_Allergies \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Medication: \_\_\_\_\_\_\_\_\_\_\_\_\_ Dosage:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Special needs or Specific requirements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME Tel (office) Cellular

Parent (1) name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent (2) name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Departure of the child**: Solo\_\_ MOM\_\_ DAD\_\_ With another adult Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Swimming pool:** I give authorization for my child to swim in all sections of the swimming pool: YES\_\_NO\_\_

**Sunscreen:** I authorise the day camp to help or apply sunscreen to my child: YES\_\_NO\_\_

Income tax receipts: Parent’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ S.I.N.: \_\_\_\_\_\_\_\_\_\_\_\_\_ % \_\_\_\_\_\_

Income tax receipts: Parents name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ S.I.N: \_\_\_\_\_\_\_\_\_\_\_\_\_ % \_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Week | Dates | Days attending ie: (full week or Mon,Tues...Friday) | Babysitting am/pm both | cost |
| 1 | June 24-28 |  |  |  |
| 2 | July 1 - July 5 |  |  |  |
| 3 | July 8 - 12 |  |  |  |
| 4 | July 15 - 19 |  |  |  |
| 5 | July 22 – 26 |  |  |  |
| 6 | July 29 – Aug 2 |  |  |  |
| 7 | Aug 5 - 9 |  |  |  |
| 8 | Aug 12 - 16 |  |  |  |
|  |  |  |  |  |
| Total $ |  |  |  |  |

NOTE: I agree to give my child’s Medicare card #, as well as the S.I.N. number for income tax purposes to the day camp administration. I understand that this information will remain confidential. In case of error in calculation upon registration, the day camp administration reserves the right to make the necessary correction(s) on this form, according to the 2019 costs. Any changes made to my file after June 15th will result in a 10$ change fee. The NSF fee is 30$. I declare that the information on this form is true and correct to the best of my knowledge. In case of missing information, a review of the case file will be done. I have read and understand all the rules and regulation pertaining to Pierrefonds Park Pool Camp summer 2019 program. I agree to comply with all clauses pertaining to this document.

**I understand that due to the short-term program, NO refund is available due to reservation fees and hiring staff. □**

I authorize Pierrefonds Park Pool to take pictures for camp activities only □

Parent’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reserved for administrative use: Cash \_\_\_\_\_\_\_\_ Cheque \_\_\_\_\_\_\_\_\_\_

Registration processed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INFORMATION & REGULATIONS - SUMMER 2019**

**NO REFUND:** This being a short term program, **no refund** is available due to fixed pre reservation fees and hiring of the staff purchasing supplies equipment etc. all based on registration numbers.

**RATES: 9**9$ per week or 25$ per day.

**METHODS OF PAYMENT (non-refundable):** Cash or cheque or credit card via PayPal.

**N.S.F. CHECK**: A $30 charge is applicable in case of N.S.F. checks.

Note: The child will not be accepted at camp until cash payment is received.

**ACCOUNTS:** All members must have an account in good standing to be eligible to register their children in the camp program.

**BABYSITTING:** A babysitting service is offered between 7:30 am and 8:30am and between 4:30pm to 6:00pm.

**Cost**: Full week = $35 / week. Mornings = $15 / week Evenings = $20 / week Occasional = $4 / hour

**After 6:00 PM = $1 / each minute of delay**

Note: These fees apply per child. Children present 6 minutes before 8:30am or after 4:30pm must pay for half an hour.

**ABSENCE / DEPARTURE:** If your child is absent, it is important to advise the DAY CAMP administration at 514-696-1139as soon as possible. Please note that **days missed will not be refunded.** A **written permission slip** will be required if your child needs to leave alone **before 4:30PM**.

**CHANGE WEEKS:** All requests to change a week chosen must be made through the administration, Please note that all changes made to your child’s registration will result in a $10 charge each time after June 15th. Unused weeks are not transferable to another child.

**UNDUE DISTURBANCE OF THE GROUP:** Parents will be advised of any inappropriate behaviour on the part of their child. In the event that there is no noticeable improvement after notifying the parents, the administration reserves the right to expel a child who would jeopardize the security of the group. Administration charges of 20% and registration fee will be retained if a refund is warranted.

**LOST & FOUND**: The day camp is not responsible for any lost and/or stolen articles at the different sites. We strongly suggest that

all articles and clothes be identified. All valuables need to be left at home. No toys, games, cards, MP3’s, cellular can be brought to camp unless otherwise specified.

**FOOD:** Due to allergies, we do not allow the children to have peanut butter or food with traces of peanuts, nuts and fish in their lunches.

**DAYS OF CAMP**: the camp is open for what is defined as 8 weeks of the summer and is open Monday to Friday.

**The present document is a contract and has legal value**