Berwick Day Camp Registration

NAME: _____ GENDER: _____ Age: _____

BIRTHDATE: _____/_____/_____ HEALTH CARD # _____
(DAY/MONTH/YEAR)

ADDRESS: _____

HOME PHONE NUMBER: _____CELL PHONE: _____

EMAIL: _____ WORK PHONE: _____

MOTHER/GAURDIAN: _____ CONTACT NUMBER: _____

FATHER/GAURDIAN: _____ CONTACT NUMBER: _____

EMERGENCY CONTACT : _____ NUMBER: _____

DOCTORS NAME: _____ NUMBER: _____

Please state and explain in detail any medical problems or allergies we should be aware of, as well as any additional information we should know about your child.

_____

_____

_____

HOW WELL CAN YOU CHILD SWIM?: _____

T-Shirt Size: YOUTH ADULT S M L XL

WEEKLY SUMMER SESSIONS:

Around the World:	July 4-8	___	Magical Kingdom:	August 1-5	___
Wacky Western:	July 11-15	___	Spy VS Scientist:	August 8-12	___
Time Travelers:	July 18-22	___	Varsity Athlete:	August 15-19	___
Carnival Extravaganza:	July 25-29	___	Superhero:	August 22-26	___

Indemnification for Berwick Summer Day Camp Participants

In consideration of the Berwick Recreational Department accepting the within application, I, _____, the parent/guardian of _____ (Applicant) agree to indemnify the Town of Berwick, its agents, volunteers and employees for any claims or demands which might be made against the Town of Berwick arising from or within consequences of the applicants attendance to any course/program offered by the Berwick Recreation Department. If under the age of 19, indemnification must be signed by the parent/guardian.

Signature or Parent/Guardian: _____ ***Date:*** _____

Sun Screen Consent Form

I, _____, give permission for my child _____ to apply sunscreen, which I have sent in its original bottle, labeled with my child's name. I also give permission to the Day Camp staff to assist my child with the application of the sunscreen to the best of their abilities. I will make sure my child comes to day camp wearing sunscreen in the morning.

☐ I do not know any allergies my child has to sunscreen

☐ My child is allergic to some sunscreens. Please **only** use the following brand(s)/type(s) of sunscreeen: _____

☐ Staff may use the sunscreen of the program's choice following the directions and recommendations printed on the product container.

I have provided the following brand/type of sunscreen for my child: _____

For medical or other reasons, please do NOT apply sunscreen to the following areas of my child's body: _____

I have checked all applicable information regarding sunscreen use and my child at Day Camp.

Parent/Guardian's Signature: _____ Date: _____

Photo Consent

I, _____, give permission for my child's _____ picture to be taken and the photos of my child participating in the Berwick Recreational Day Camps and programs. I also consent to the possible use of the photos in future promotional materials.

_____ Yes _____ No Signature: _____

Active Travel Home

If your child wishes to travel home from camp, on their own accord, by walking or riding a bike, you must tell the counselors the morning of! Children will not be allowed to leave the counselors on their own accord without previous approval.

Berwick Recreation Fee Structure:

Berwick Recreation would like to provide much needed financial support for children and families who are unable to afford the full cost of participation in our programs. The below fees have been created with those desires in mind, with family discounts available.

Day Camp Fee:

- ☐ One Child Attending: $100
- ☐ Two Children Attending: $190
- ☐ Three Children Attending: $180
- ☐ I am paying through Jump Start
- ☐ I am unable to pay the registration fee for my child/children and wish to speak to someone about my options.

I am paying using the following method:

- ☐ Cheque
- ☐ Cash

If multiple children are attending, please write their names below:

_____

_____

_____

Thank you for completing the Berwick Recreation Day Camp Registration Form. If you have any questions, feel free to contact the Recreation Department at:

236 Commercial St, PO Box 130
Berwick, NS B0P 1E0
Tel: (902) 538- 8616
Fax: (902) 538-3724
Email: recreationintern@berwick.ca
Site: www.town.berwick.ns.ca