

Eva Rothwell Centre

Eva Rothwell Centre - Summer Day Camp 2022 Registration Form

Camper's Name: _____ Age: _____

Address: _____ Postal Code: _____

Phone: _____ Birthday: _____ Gender: _____

Parent/Guardian: _____

Family Doctor: _____ Phone: _____

Emergency Contact (1): _____ Phone: _____

Emergency Contact (2): _____ Phone: _____

Special Information (Allergies, Medication, Restricted Activities, etc.): _____

Is your child permitted to go swimming? (Please check one) Yes: ☐ No: ☐

Child's swimming ability? Non-swimmer: ☐ Shallow End: ☐ Deep End: ☐

What Swimmer Level is your child _____

DROP-OFF / PICK-UP INFORMATION

Regular Drop-off starts at 9:00 a.m. | Regular Pick up is at 4:00 p.m.

Early drop-off starts no earlier than 8:00 a.m. | Late pick-up runs no later than 5:30 p.m.

Drop-Off Time (A.M.): _____ Pick-Up Time (P.M.): _____ Child Leaves Independently: ☐

Picked Up By: Father ☐ Mother: ☐ Other: ☐ If other, list relationship: _____

Name of Father/Mother/Other Guardian: _____

INDICATE REGISTERED SUMMER CAMP ATTENDANCE (please use an x)

Week 1 - July 4th-8th 2022 _____

Week 6 - August 8th-12th 2022 _____

Week 2 - July 11th-15th 2022 _____

Week 7 - August 15th-19th 2022 _____

Week 3 - July 18th-22nd 2022 _____

Week 8 - August 22nd-26th 2022 _____

Week 4 - July 25th-29th 2022 _____

Week 9 - Aug 29th-Sept 2nd 2022 _____

Week 5 - August 2nd-5th 2022 (Civic Holiday) _____

I, _____, am the parent/guardian of _____.
(Print Full Name) (Child/Dependant's Full Name)

and agree to let my child/ren and/or dependant participate in programs through the Eva Rothwell Centre, representatives and volunteers from all responsibility and liability for injuries or damages resulting from my child/ren and/or dependant under my guardianship participation in and activities of said event, including transportation to and from the program and the Eva Rothwell Centre. I also understand that the supervisors of the program have several participants to supervise, and must have cooperation to keep all participants safe. I take responsibility for all of my actions as well as any actions of child/ren and/or dependants that I am the legal guardian of, and understand that uncooperative and dangerous behaviour will not be tolerated at any time. This may include the exclusion of my child/ren and/or dependant's participation in future events and or possible transportation home from the event at my own expense. All participants act appropriately for a safe trip, and the representatives of the Eva Rothwell Centre are working to keep the event a safe and rewarding success. I agree to let my child/ren and/or dependants participate in said programs. I understand the risks associated with participation and hereby release from liability the Eva Rothwell Centre and all officials, employees, representatives, and volunteers thereof. I also agree to abide by the COVID-19 best practices of the Eva Rothwell Centre Camp and will take all precautions to ensure that my child/ren are educated with all necessary safety precautions.

Signature of Parent/Guardian: _____ Date:_____

IN OFFICE USE ONLY

Total Weeks: _____ x \$40	Total: \$_____
Total Early Drop-Off/Late Pick-Up: _____ x \$5	Total: \$_____
CASH OR POST-DATED CHEQUES ONLY	Grand Total: \$_____
Cheque #:_____ Receipt #:_____	
Staff Signature_____	