

Camp Information

Junior Camp: Ages 4 – 7
Senior Camp: Ages 8 – 12
Camp Dates: July 3rd – August 24th, 2018
Camp Time: Monday – Friday, 9:00am-4:00pm*
Cost: \$10/day if preregistered and paid in advance by Thursday of the week before camp \$15/day for drop-in \$30/day trip days (TBA end of June) Payment methods: cash, cheque (issued to Canning Recreation), or e-transfer (email PW once sent)
Drop-off location: Glooscap Elementary School**

- Be sure to bring at least two snacks and a healthy lunch to provide needed energy throughout the day

- Bring sunscreen***

- Wear appropriate clothing for weather; bathing suits and towels recommended every Friday

*Regular drop-off times are 8:45am-9:00am and regular pick-up times are 3:45pm-4:00pm; early drop off available between 7:30am-8:45am, late pickup available between 4:00pm-5:15pm. Arrangements are only accepted in advance (minimum Thursday before camp week) for an additional \$5/family/drop-off and pick-up arrangement.

**Camp will take place at Glooscap Elementary School and the Canning Multicomplex Civic Centre; camp staff will have schedules available detailing exact camp locations mid-June, but drop-off will always take place at Glooscap Elementary School except on days when camp is held in Kingsport – drop-off will be at the Lloyd Memorial Community Centre. An authorized parent/guardian MUST make contact with camp staff at pick-up AND drop-off times.

***CDRC staff have a responsibility to insure protection from UV rays and will assist in sufficient application of sunscreen unless parent/guardian specifies otherwise

PLEASE NOTE: Registration and payment for camp will need to be confirmed and received NO LATER than the Thursday of the preceding week; failure to do so will result in a drop-in fee charged instead of preregistered fee as well as no guarantee for special drop-off or pick-up arrangement.

Important Dates:

July 2nd: No Camp July 19th: Kingsport July 20th: Camp ends @ 2PM August 1st: Day Trip August 2nd: Kingsport August 6th: No Camp August 10th: Camp ends @ 2PM August 16th: Kingsport August 22nd: Day Trip

Camp Registration Dates

Child's Name: _____ Age: _____

JR Camper (age 4-7): _____ SR Camper (age 8-12): _____

Please indicate which day(s) your child will be attending Activity Camp.

ALL WEEK	Monday	Tuesday	Wednesday	Thursday	Friday
July 3 rd – 6 th	NO CAMP				
July 9 th – 13 th					
July 16 th – 20 th				KINGSPORT	Camp Ends 2pm
July 23 rd – 27 th					
July 30 th – August 3 rd			DAY TRIP	KINGSPORT	
August 6 th - 10 th	NO CAMP				Camp Ends
August 13 th – 17 th				KINGSPORT	2pm
August 20 th – 24 th			DAY TRIP		

I will need early drop off at ______ (time) on the following dates: ______

I will need late pick up at ______ (time) on the following dates: ______

I would be interested in sending my child for a bonus camp week from August 27^{th} – August 30^{th} *if offered* (please circle response): YES NO

Parent #1:	Parent #2:
Primary Ph:	Primary Ph:
Secondary Ph:	Secondary Ph:
Email:	

Child's Name:		
Emergency Contact:	Ph:	_
The following people are authorized to pickup my ch	ild:	

Pertinent allergies/medical information: _____

Please note: while we make every effort to accommodate all children in our programming, we understand not all children will be successful in the traditional summer camp program setting. As a result, you are welcome to send your child with one-on-one support to help gain the best summer camp experience for them. Please contact the Recreation Office to discuss any behavioral concerns you may have or steps for success for your child that we can implement at summer camp.

Please read the following and sign below to indicate your understanding and agreement:

The Canning & District Recreational Commission staff is responsible for the supervision of children, including my child, during the above registered program(s), which has inherent risks. The staff reserves the right to remove any child from the program if the child's behavior is such that it interferes with the safety of themselves or others, or if the operation of the program is hindered.

I, the undersigned, do hereby agree to allow my child to participate in the stated registered program, and I further agree to indemnify and hold Canning & District Recreational Commission and its staff harmless from and against any and all liability for any injury which may be suffered by the aforementioned individual arising out of or in any way connected with his/her participation in this program. I further authorize the administration of any first aid steps that may be deemed necessary by qualified personnel.

Parent or Guardian Signature _____ Date: _____

Videography/Photography Consent: We occasionally take photos or video to document programs or activities which could then be used in our educational or promotional materials. Permission is granted for CDRC to use still photographs or video for this participant for these purposes only.

Yes: _____ No: _____ Participant's Name: ______

Parent/Guardian Signature: _____

Forms can be returned via email: <u>director@canningrecreation.com</u> or fax: (902) 582-3221, in person at our camp registration night on May 31st at Glooscap Elementary School or at 9845 Main Street, Canning (please call ahead if you are planning to drop off forms in person)