



SPART CAMP

REGISTRATION FORM & WAIVER

PLEASE PRINT AND FILL OUT COMPLETELY

PROGRAM REGISTRATION

Participant's Name: _____

Participant's Date of Birth: _____ School Grade: _____

MAIN CONTACT (PARENT/LEGAL GAURDIAN)

Participant's Parent or Guardian Name: _____

Mailing Address: _____

Home Phone: _____ Cell Phone: _____

Parent/Guardian email: _____

Note: Communication about programs will often be done by email. *Please list email that you check on a regular basis.*

MEDICAL INFORMATION (for minors only)

In Case of Emergency (if parent/guardian cannot be contacted), please contact:

Name: _____ Phone: _____

Allergies/Medical Conditions: _____

Does this participant have any physical, psychiatric, emotional or behavioral conditions of which the instructors should be aware? _____

Restrictions on activities: _____

PROGRAM INFORMATION

REGISTRATION CLOSES JUNE 8TH

Please only register for one camp session for this registration deadline. If there are spots still open after June 8th registration will re-open to fill those spots.

Week 1 – July 16-20 _____ Fee: \$50.00

Week 2 – August 13-17 _____ Fee: \$50.00

Rec Membership Required to Participate Individual \$10 Family \$25 Membership Fee: \$
(valid from Sept 1 current year - Aug 30 next year)

Payment Method:

TOTAL PAID: \$ _____

Cheque(s) payable to the 'Town of Regina Beach' and can be dropped off at the Town Office during regular office hours (Mon-Fri 8:30-4:30) or dropped off in the mail slot (at the Town Office front door) after hours.

Debit card or cash payment.

SEE BACK

PHOTO RELEASE:

I hereby authorize Town of Regina Beach Parks & Recreation, LMLCC, its representatives & employees the right to take photographs of minor listed above in connection with South Shore SPART Camp. I agree that Town of Regina Beach Parks & Recreation and LMLCC may use such photographs of minor with or without his/her name & for any lawful purpose, including purposes such as publicity, advertising, Web & Facebook content.

Signature of Parent / Guardian

Date

ASSUMPTION OF RISK, WAIVER & RELEASE OF LIABILITY FOR MINOR (please read before signing)

For the Parent/Guardian on behalf of the Minor:

"I hereby grant permission for my child, _____, to be a member of the SPART Camp at Regina Beach, SK and to participate in activities arranged by the Recreation Coordinator, the LMLCC and any, and all, instructors, coaches and organizers. We recognize the importance of the commitment that he/she makes and that their participation as a part of a larger community calls for responsible behavior. Therefore, I agree that if this child engages in behavior which, in the judgement of the leader, is not in the best interest of the camp, activity or event, my child or any member of the group may, therefore, be sent home."

"In return for allowing Minor to participate in this camp, I, on behalf of Minor and for myself, hereby waive, release and discharge the Town of Regina Beach, LMLCC, its officers, employees, agents and volunteers, for any and all claims for damages for personal injury, disability, death or property of any kind which may accrue to Minor or myself as a result of his/her participation in this recreation program. This waiver and release is expressly intended to discharge in advance the Town of Regina Beach, the LMLCC and its officers, employees, agents and volunteers from and against any and all liability arising out of or connected in any way with Minor's participation in this program."

"This Assumption of Risk, Waiver and Release of Liability shall apply to Minor and myself, as well as any of our heirs, executors or administrators. By my signature below, I hereby certify that I am the parent or legal guardian of Minor and that I am acting in that capacity. Further, I acknowledge that I have read this document and understand its contents."

Parent/Guardian Name (PRINT)

Signature of Parent/Guardian

Date

Additional Information Required

I understand that if my child is involved in behavioral issues during the program, I will be contacted to pick him/her up immediately. *Initial Here:* _____

I understand that my child is required to be picked up & dropped off on time from the program. *Initial Here:* _____

List all individuals who have permission to pick up child:

