

2022 Crossfield Summer Youth Recreation Program Registration Form

****All sections of this form must be complete****

Participant's Information:

Participant's Name (First, Last): _____

Date of Birth: _____ Alberta Healthcare #: _____

Allergies/medical conditions: **Please Check** ☐ YES or ☐ NO

If yes, please state them & provide all necessary information:

Contact Information:

Parent/Guardian Name(s): _____

Home Phone Number: _____ Work/Cell Number: _____

Email Address: _____

Mailing Address: _____

Emergency Contact Information:

Emergency Contact Name: _____ Phone Number: _____

2nd Emergency Contact Name: _____ Phone Number: _____

By initialing this box, you are acknowledging that if your child is injured, and in the opinion of the program staff requires further medical attention, an ambulance will be called: ☐

If yes to the above question, please understand that the fee for the ambulance is your responsibility.

Permissions:

☐ Please check this box if your child may go home unsupervised when we return from trips.

☐ **Photography Consent:** please check this box to give staff permission to take and use photographs of your child during their participation in the program.

2022 Crossfield Summer Youth Recreation Program Registration Form

	Date	Ages	Price	Please Check ✓	<u>TOTAL</u>
SWIMMING Didsbury Aquatic Center	Thursday, July 14th	8+	\$10		
	Thursday, July 21st	8+	\$10		
	Thursday, July 28th	8+	\$10		
	Thursday, August 4th	8+	\$10		
	Thursday, August 11th	8+	\$10		
	Thursday, August 18th	8+	\$10		
Laser City	Wednesday, July 6th	8+	\$15		
Aquasplash *Extra Waiver Required	Tuesday, July 12th	10+	\$25		
Heritage Park	Friday, July 22nd	8+	\$15		
Calgary Climbing Centre *Extra Waiver Required	Wednesday July 18 th	9+	\$25		
Calgary Zoo	Friday, July 29th	8+	\$20		
Big Fun Inflatable Park *Extra Waiver Required	Tuesday, August 2nd	9+	\$20		
TELUS Spark	Wednesday, August 10th	8+	\$15		
Calaway Park	Friday, August 12th	10+	\$30		
Flying Squirrel *Extra Waiver Required	Tuesday, August 16th	8+	\$25		
Monster Mini Golf	Friday, August 19th	8+	\$15		

TOTAL: _____

Please see next page.

- Pre-registration is required, and registration is on a first-come, first-served basis.
- Full payment is due upon registration and is required to confirm your child's spot.
- A zero-tolerance policy is in place for inappropriate behavior. Any misbehavior will be dealt with as the supervisor sees fit. At the supervisor's discretion, children will be removed from future activities. *No refunds will be provided in this situation.*
- Cancellation Policy: Cancellations must be made a minimum of 48 hours before the scheduled activity. Registration fees will be forfeited if less than 48 hours' notice is provided.

Crossfield Summer Youth Recreation Program Informed Consent

I, _____, the parent/legal guardian of _____ understand and acknowledge that personal injury, property damage or loss, and possible death may occur during my child's participation in the Crossfield Summer Youth Recreation Program. I fully understand these risks and hereby agree to allow my child to participate in the Crossfield Summer Youth Recreation Program.

In consideration of my child's participation in the Crossfield Summer Youth Recreation Program, I agree that the Crossfield Summer Youth Recreation Program, the Town of Crossfield, and their employees, contractors and volunteers shall not be liable for any personal injury, property damage or loss, or death however arising, from or in any way resulting from my child's participation in activities offered, organized, or provided by the Crossfield Summer Youth Recreation Program. I further hereby agree to indemnify and hold harmless the Crossfield Summer Youth Recreation Program, the Town of Crossfield, and their employees, contractors and volunteers from any damage, claims, or demands in respect of such damage or loss.

I, the parent/legal guardian of the participant named herein, hereby declare that I have read, and understood, and agree to the contents of this Informed Consent Form in its entirety. I agree to assume full responsibility to instruct my child of the risks involved, and to inform him/her of the importance of abiding by the rules, regulations and code of conduct. I, the parent/legal guardian, declare that the registration information I have provided is correct and agree that I am responsible to make the Crossfield Summer Youth Recreation Program staff aware of any changes that need to be made to my child's information contained within this registration form. I, the parent/legal guardian, grant permission for the Crossfield Summer Youth Recreation Program staff to administer any minor medical treatment that may be required (provide bandages, cold packs, etc.).

Parent's Name: _____ Parent's Signature: _____

Date: _____

Please Note: This Registration Form and Informed Consent Form will be kept on file for use by the program staff throughout 2022. The personal information on these forms is collected under the Freedom of Information and Protection of Privacy Act and is solely for the purpose of ensuring the care of your child while attending the Crossfield Escapes Summer Youth Recreation Program.