



More Youth Programs @ Place Maillardville Community Centre

Future Chefs

Have fun learning to cook and eat healthy and delicious food!
Ages: 10 to 14 years

Mondays: 3:15pm - 5:15pm

Cost: \$12 for 4 classes

Location: Maillard Middle School

Dates: Feb 2 - Mar 2 (no class Feb 9)



Coquitlam

MCG - Magic Card Gathering

Join one of our leaders from Place Maillardville Community Centre for a match of magic cards! Runs for 8 classes. **Ages: 10 - 14 years**

Fridays: 3:00pm - 4:30 pm

Cost: Free Drop-In Program @

Location: Maillard Middle School

Dates: Jan 30 - Apr 24

(no class Feb 20, Mar 13 & 20, Apr 3 & 17)



Coquitlam

Children's Birthday Parties

Place Maillardville offers the ideal location for a birthday party for children aged 1 to 12. We provide staff to organize a craft, game or fun activity. Inquire about our magic shows.

For details, call 604-933-6166.

Saturdays: 1:30pm - 3:30pm

Sundays: 10:30am - 12:30pm

and/or 1:30pm - 3:30pm

Fee: \$145 for 12 children, additional \$5/child over & above 12 children.

March Break Camp!

We are offering a full week of fun activities, sports and games. Co-hosted by Maillard Middle School!

Mini Camp: Grade K to 3

Youth Camp: Grade 4 to 7

Week 1: March 9 - 13

Week 2: March 16 - 20

Time: 8:30am - 3:30pm

Cost: \$125 week/child

After Care: 3:30 - 4:30 @ \$25/week/child

Vancity Youth Job Club

Make lasting friendships while getting volunteer experience, planning a fundraising event, and taking a fun group out-trip. Learn how to write a resume and do practice interviews in a fun, creative environment. Includes a Free Emergency First Aid Course.

Ages: 14 - 18 yrs

Location: Place Maillardville Community Centre

Cost: FREE

Dates: Saturdays, Mar 7 - June 6

Time: 1:30pm - 4:00 pm

Vancity



Thank YOU!

To Register for the above programs, call the Centre at 604-933-6166

Place Maillardville
Community Centre



After-School Programs
Winter 2015

1200 Cartier Ave, Coquitlam BC, V3K 2C3, Phone: 604.933.6166

Rochester Elementary

REGISTRATION DATE:

Tuesday - January 27, 2015

Time: 2:45 pm

Location: Rochester Elementary

• **Must Register in Person**

(First Come First Served)

• **Choose a program(s) from this page.**

• **Fill in waiver on the inside of this form.**

• **Bring completed waiver form. If paying by cheque, please wait to fill out amount as there may be a waitlist.**

• **The school office will not be collecting waivers.**

• **Registration may open early based on volume.**

Soccer & More - Grades 4-5

Join us for a variety of sports, with a focus on learning some new soccer skills and drills. Let's play!

Mondays: Feb 23 - May 25

(no class Apr 6 & May 18)

Cost: \$10 for 10 weeks

Gym: 3:00 - 4:30 pm

Crafts & Blocks & Yoga

Grades 1 - 3

Create some fun crafts and/or build an impressive tower out of Keva blocks. Wrap up with some challenging and relaxing yoga moves!

Tuesdays: Session # 1 Feb 24 - Apr 7

Session # 2 Apr 14 - May 12

Kids may sign up for only 1 session. Maximum of 15 participants per session.

Cost: \$10 for 5 weeks

Gym: 3:00 - 4:30 pm

Sports & Games

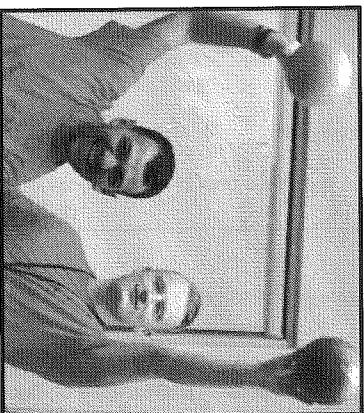
Grades 1 - 3

Meet new friends & try something new. Join us for a variety of sports and games!

Wednesdays: Feb 25 - May 13

Cost: \$10 for 10 weeks

Gym: 3:00 - 4:30 pm



Funding provided by the
United Way of the Lower Mainland!



**Place Maillardville
Community Centre**



**After School Programs
Winter 2015 - Waiver Form**

1200 Cartier Ave, Coquitlam BC, V3K 2C3, Phone: 604.933.6166

IMPORTANT: What Phone # can we reach you between 3:00 and 5:00 pm? →

#

Program Name #1: _____ Program Name #2: _____

Student Name: _____ Family Name: _____

Address: _____ City: _____ Postal Code: _____

Home Phone: _____ Email Address: _____

Date of Birth ____/____/____ Age: ____ Grade: ____ Male Female

Parent/Guardian #1 _____ Cell: _____ Parent/Guardian #2: _____ Cell: _____

List Medical or Behavioral Concerns: _____ List All Food Restrictions: _____

WHO IS AUTHORIZED TO PICK UP YOUR CHILD?

If the person picking up your child is **NOT** the PARENT or GUARDIAN above, fill this box in.

Authorized Pick-Up #1 _____ Relationship _____ Phone # _____

Authorized Pick-Up #2 _____ Relationship _____ Phone # _____

Is your child attending the **SCHOOL DAYCARE** after this program? NO YES

CAN YOUR CHILD WALK HOME ALONE? NO YES If YES, fill in your permission below.

I/We _____ give permission for our son/daughter _____ to walk home from the afterschool activities on their own.

Photo Release Consent

As part of funding for this program, we are required to take photos of our programs in action. Photos may be used in our year-end report, as well as on our website, facebook and promotional brochures. Your child's name will NOT appear in the photo.

I give permission for my child's photo to be used to promote future Place Maillardville programs and/or community events.

I request that you only use my child's photo for funding requirements, but Do Not use my child's photo in promotional publications, website or facebook page.

Program Expectations

- If your child cannot attend a class, you **MUST** phone Place Maillardville Community Centre at 604.933.6166.
- At the end of each class, we require that you sign out your child with the instructor.

I/We agree that our son/daughter will follow all reasonable instructions and directions of the program instructor(s) in connection with the operation of Place Maillardville. I/We release, remise and forever discharge Place Maillardville staff, program instructor(s) and partners of Place Maillardville of and from all manner of actions, claims and demands of whatever nature which result from any accidental injury, loss of expense sustained, arising out of or in any way connected with participation in any Place Maillardville program or event. In the event that our son/daughter is injured, ill or in need of medical attention and I/We are unable to be contacted, I/We authorize Place Maillardville staff, program instructor(s) and volunteers to seek medical attention on my/our behalf. **Privacy Note:** Personal Information on this form will be disclosed only to After School Program Leaders. The above Information will be secured at Place Maillardville Community Centre only, and will be destroyed at the end of the program.

Parent/Guardian Signature Date

PAYMENT INFORMATION -(office use only)

If paying by **CREDIT CARD**, please complete:

Credit Card Number: _____
Expiry Date: _____

Card Holder's Name: _____

Signature: _____

If paying by **CHEQUE**, please make cheques payable to Place Maillardville.

Program Name	Payment Type					Activnet	
	Type	Cheq#	Amount	Intl	Date	Date	Intl
#1: _____ <input type="checkbox"/> Waitlisted			\$				
#2: _____ <input type="checkbox"/> Waitlisted			\$				