SEAVIEW COMMUNITY SCHOOL

SUMMER DAY CAMP REGISTRATION 2018

School:_____

Child's Name:_____ **Age:**_____ **Birth date:**_____

Care Card / Medical #: _____

Parent / Guardian: _____ **Home Phone:**_____

Address: _____ **Cell:** _____

Email:_____ **Work:**_____

Emergency Contact: _____ **Phone:**_____

Doctor: _____ **Phone:**_____

Please list any allergies and/or medical concerns: _____

_____

CAMP FEE SCHEDULE

CHILDREN'S CAMP	Early Bird Special		Full Week Cost	Daily Rate	Please Circle Days
SC - W1: JULY 03 – JULY 06, 2018	$95.00	☐	$100	# ___ DAY(S) X $35.00	T W TH F
SC – W2: JULY 09 – JULY 13, 2018	$110.00	☐	$120	# ___ DAY(S) X $35.00	M T W TH F
SC – W3: JULY 16 – JULY 20, 2018	$110.00	☐	$120	# ___ DAY(S) X $35.00	M T W TH F
SC – W4: JULY 23 – JULY 27, 2018	$110.00	☐	$120	# ___ DAY(S) X $35.00	M T W TH F
SC – W5: JULY 30 – AUG 03, 2018	$110.00	☐	$120	# ___ DAY(S) X $35.00	M T W TH F
SC – W6: AUG. 07 - AUG. 10, 2018	$95.00	☐	$100	# ___ DAY(S) X $35.00	T W TH F

YOUTH CAMP	Full Week Cost		Daily Rate	Please Circle Days	FIELD TRIP
SY - W1: JULY 03 – JULY 06, 2018	$120.00	☐	# ___ DAY(S) X $30.00	T TH F	Polaris
SY – W2: JULY 09 – JULY 13, 2018	$135.00	☐	# ___ DAY(S) X $30.00	M W TH F	Vancouver Zoo
SY – W3: JULY 16 – JULY 20, 2018	$135.00	☐	# ___ DAY(S) X $30.00	M T W TH	Stanley Park
SY – W4: JULY 23 – JULY 27, 2018	$135.00	☐	# ___ DAY(S) X $30.00	M T TH F	Science World
SY – W5: JULY 30 – AUG 03, 2018	$135.00	☐	# ___ DAY(S) X $30.00	M W TH F	Watermania
SY – W6: AUG. 07 - AUG. 10, 2018	$120.00	☐	# ___ DAY(S) X $30.00	T TH F	Rocky Point Park

NO DAILY AVALIABLE ON FIELD TRIP DAYS

TOTAL WEEKLY FEES: $_____ **TOTAL DAILY FEES: $**_____ **Total Fees: $**_____

COUPON AMOUNT: $_____ **TOTAL FEES PAID: $**_____ **Coordinator Initials:** _____

Cheque #_____ **Cash Amount $**_____ **Receipt Number:** _____

PERMISSION AND ACKNOWLEDGEMENT OF RISK

Initial _____ My child has permission to attend functions associated with this program

Initial _____ My child will be picked up by: _____

Or _____

Initial _____ My child will walk home. YES_____ NO_____ PLEASE CHECK (REQUIRED)

- **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 the Community Schools of School District #43 Coquitlam. While community school camp staff will take reasonable steps to prevent injuries to students, some degree of risk is inherent in activities and injury may occur without fault on the part of the student, the school board, its employees and volunteers, or the facility where the activity is taking place. By allowing your child to participate in this camp, you are agreeing that the camp activities are suitable for your child and acknowledging that you understand there is a risk of injury associated with it.**

- **In the event that our child(ren)is/are injured, ill or in need of immediate medical attention and I/we are unable to be contacted, I/we authorize school district staff, Program Instructors and volunteers to seek medical attention on my/our behalf.**

Photographs/Published Names: In accordance with the Freedom of Information and Protection of Privacy Act, School District No. 43 (Coquitlam) requires consent to use personal information for purposes unrelated to educational programs. The School District requests permission to use photographs/videos/names of individual students and groups of students in a variety of publications to promote the community school programs. This could include newsletters, brochures, newspapers, magazines, reports, public websites, radio, videos or television. This would also include permission for your child to be photographed by the media (TV or newspaper) for events relating to our community school programs.

☐ **YES - I give my consent for the publication of my child's photograph/name and comments for purposes consistent with the above.**

☐ **NO - I do not permit the publication of my child's photograph/name and comments for purposes consistent with the above.**

Summer Camp Cancellation Policy

A full refund will be given for any cancelled weeks prior June 13, 2018. Any cancellations after June 13, 2018 will be charged a $25.00 ***administration fee*** for each week cancelled. If you cancel during the camp, refunds will not be issued for paper registration (cash and cheque payments) until September when the School Accounting Clerk returns. Online registrations refunds will be available during summer camp.

Signature of Parent/ Guardian_____ Date_____