



PARKS AND RECREATION

Day Camp Registration Form 2011

Registration Date: Thursday June 16th 6:00 pm - 7:30 pm

Kentville Recreation Dept. Town Hall, 354 Main Street

Please read and complete the following form to be used by the Town of Kentville for registration in Kentville Day Camp Programs. Partially completed forms will not be accepted.

Accepted methods of payment are cash and personal cheque. Payment must be received in full before the start date of any session in which you wish to enrol your child.

To secure a spot in any session a post dated cheque may be used, however cheques must be post dated for the Monday of the week prior to the session being booked. (i.e: for a session beginning July 4 a cheque must be post dated for June 27th) Registration is not complete unless payment in full, or a post dated cheque has been received, and the waiver form has been signed and submitted. (see attached) A charge of \$20.00 is applied by The Town to any cheques returned NSF.

Partial sessions are not available. Registration will be accepted for full weeks only. A babysitting service will be available before and after camp times. Babysitting can be registered and paid for on the first day of each session. Babysitting is \$10.00 per child per session, cash only.

I live in the Town of Kentville

I live outside the Town of Kentville

<u>CAMPER NAME/AGE</u>	<u>HEALTH CARD NUMBER</u>	<u>CAMP (j/s/k)</u>	<u>SESSION</u>
_____	_____	_____	1 2 3 4 5 6 7 8
_____	_____	_____	1 2 3 4 5 6 7 8
_____	_____	_____	1 2 3 4 5 6 7 8
_____	_____	_____	1 2 3 4 5 6 7 8

General Contact Information

Mother (or guardian) Name : _____

Home Phone: _____ **Work Phone:** _____

Mailing Address:

Father (or guardian) Name : _____

Home Phone: _____ **Work Phone:** _____

Mailing Address: (if different from above)

Please list any allergies, relevant medical information or special needs your child has:

Emergency Contact:

Please provide the name and phone number of a person who may be contacted in an emergency, in the event that staff are unable to reach a parent or guardian.

Emergency contact: _____ Phone: _____

Family Doctor's Name _____ Phone: _____

Does your child have any particular fears? _____

Is there anyone not permitted to pick up your child? _____

Indicate (if any) level of swimming completed by your child _____

Do you have any suggestions regarding this years camp program?



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Waiver

I am aware that the staff and the Town of Kentville are responsible for my child/children upon his/her/their entrance of day camp. I understand that the Town assumes no responsibility or liability for loss suffered by my child. The Town of Kentville also has the right to remove my child from camp if my child has proven to be a hindrance to the successful operation of day camps as a result of medical condition, disciplinary problems etc. If my child is removed from camp for disciplinary reasons no refund will be issued for any days missed.

Refund Policy

There will be an administration fee of \$10.00 for each cancellation and/or refund processed by the Town of Kentville. Refunds will only be provided if a child has taken part in 2 days or less in any given camp for reasons unforeseeable and unplanned. In such cases, up to half the registration fee minus the \$10.00 administration fee may be refunded. Refunds must be requested through the Kentville Parks and Recreation Department and take 7-14 days to be processed. Refunds will only be issued to persons named on the registration form, and will be given in the form of a cheque.

I _____ have read and understand the above “waiver” and “refund policy” sections of this contract and agree to the terms stated within each.

Signature

Date

I agree that photos of my child participating in Kentville Recreational Programs may be used in the future for promotional materials. “YES” “NO”