



2019 Camp Information and Registration

Please Check	\$125 PAID Early Bird \$115- by April 30/2019	Camp	<u>PAYMENT RCVD</u> Cheque # /Cash/ e-transfer
		Great Outdoor Adventure July 15-18	
		Adventureland July 22-25	
		Dino Camp July 29-Aug 1	
		Out of this World Aug 12-15	
		Super Heroes Get Ready for School Aug 19-22	
TOTAL : ___# Camps x fee			Owe:
			Paid:

Child's Information

Last Name: _____ First Name: _____

D.O.B. M ___ D ___ YR ___ AGE: ___ Gender M ___ F ___

Address: _____

City: _____ Province: _____ Postal code _____

Home Phone# _____

Mother's Information _____ Child lives with: Y ___ N ___

Last Name: _____ First Name: _____

Home Address: _____
City: _____ Province: _____ Work # _____
Cell # _____ Occupation: _____
Email: _____

Father's Information Child lives with: Y ___ N ___
Last Name: _____ First Name: _____
Home Address: _____
City: _____ Province: _____ Work # _____
Cell # _____ Occupation: _____
Email: _____

Emergency Contacts (Other than Mother or Father / Local contacts)

1. Name: _____ Relationship to child: _____
Address _____ City: _____
Home # _____ Cell # _____ Work# _____

2. Name: _____ Relationship to child: _____
Address _____ City: _____
Home # _____ Cell # _____ Work# _____

Who can the child be picked-up by, other than Mother and Father listed above.

1. _____ # _____
2. _____ # _____

Please note, if you are not picking your child up those on the above list will be required to show photo Id when picking up your child. We also ask that you please let the camp staff know if it will not be your self (mother or father) picking up that day so we can be prepared and know who to expect.

Medical Information

Child's Name: _____ *D.O.B.* _____

Is the child's Immunizations up to date: Y_____N_____

Does your child have any allergies: Y_____N_____, Please Explain:_____

Does your child require an EPI PEN or Inhaler? Y_____N_____ If Yes, you will need to have one in your child's back pack at all times while at school or give the school a spare one to have on hand.

Does your child have any medical conditions, emotional or developmental challenges/ or received PUF funding this year: If Yes, Please explain:

Does your child have food sensitivities, food allergies, or a special diet? If yes, please explain:_____

Is your child on any ongoing medications? If yes, please list:_____

Consent for medical treatment of my child

In an emergency, my child may need medical or surgical treatment. If an emergency occurs, every reasonable effort must first be made to contact me. If I cannot be reached, I give permission to the emergency medical treatment of my child. Any expense incurred for emergency medical treatment under this section will be my responsibility.

Sign:_____ Date:_____

Consent

*I, _____ (Name), parent/legal guardian
of _____ (child's name) hereby grant
permission for my child;*

a) to participate in all of the activities organized by T.L.C. Preschool for Summer camps

b) to use all the play equipment owned or used by T.L.C. Preschool

c) to leave the school premises under the supervision of staff of T.L.C. Preschool for walks in the neighbourhood and to the park.

Yes, I Agree _____ Parent Initial

Cancellation/ Withdrawal -I understand and agree that if I remove my child from a summer camp a \$50 registration fee will be kept and the remainder camp fee will be mailed to me within 30 days of removal from the camp. If I remove my child less then 14 days from the camp start date the camp fee is non-refundable. Agree _____Parent Initial

Accidents-When a child participates in an activity organized for preschool aged children there is always a risk. I acknowledge that the organizers will not be able to fully supervise, care for, or control the participants involved in the preschool activities.

Yes, I Agree _____Parent Initial

Late Fee for Camp-I understand I will be charged \$1 a minute that I am late after a 5 minute grace period at the end of camp, unless it was an emergency and a call has been made to let T.L.C. Preschool camp staff know.

Yes, I Agree _____Parent Initial

Photo Consent -T.L.C. Preschool will take photo's through out camp for the use of scrapbooks, parent boards, arts and crafts, and on the webpage.

Yes, I Agree my child can be photographed. _____ Parent Initial

I DO NOT Agree to my child being photographed. _____ Parent Initial

T.L.C. Preschool Summer Camp
Discipline policy is as follows;

Within every preschool setting appropriate guidelines must be set to ensure the safety and well being of all the children. Our intent at T.L.C. Preschool is to provide a positive approach to discipline. The learning process involves teaching children to resolve their difficulties in a positive manner and develop self-control. We encourage positive and appropriate behaviour in the classroom.

There will be occasions where a child will be having trouble controlling his/her behaviour and will interfere with another child's work or disrupt a group's activity. At this time the teacher will attempt to redirect his/her attention in a firm, kind and flexible manner by offering choices of other activities and/or behaviour. If the child continues to misbehave, a discussion between teacher and child to discuss appropriate behaviours will occur. If the child does not respond positively to the choices offered, the teacher will separate the child from the other children to a table and chair. The child will remain there until he/she has settled and he/she feels ready to rejoin the group.

If a child has significant problems cooperating with peers or teachers, his/her parents will be contacted and a mutually satisfactory approach will be agreed upon.

It is important to respect children's feelings and to be sensitive to the children's emotional state. Some children may misbehave due to illness, being over tired, or some event at home. We as teachers need to know of any problems arising in your child's life, which will affect your child's performance.

I, _____ (Parent) have read and understood
T.L.C. Preschool Summer Camp Discipline Policy.

Signed _____ Date _____

Communicable Disease Policy

The following criteria should be used to decide when a child is too ill to attend summer camp. Your child should not attend if he/she has any of the following symptoms:

Diarrhea

Vomiting

Cold

Fever

Rash

Ear Infection

Pink Eye (conjunctivitis) Cough

Sore throat

If a child develops any of the above symptoms while at camp, you or your contact person will be notified to take the child home. In the case of a communicable disease (measles, mumps, rubella etc.), or a parasitic infection, those infected may not attend camp until clearance from the Doctor or health unit is obtained.

A child must be on antibiotics for at least 24 hours, and feeling well, to be able to attend preschool.

*I, _____ (Parent) have read and understood
T.L.C. Preschool's Summer Camp Communicable Disease Policy.*

Signed _____ Date _____