

Camp Awesome at KUC 2010

Children's Registration Form

Fees: \$50.00 per child

Registrar: Lisa Petch (613)592-5834 or e-mail: campawesome@kuc.ca

Child's Information

Session (Pick **ONE** only)

July 19 - 23, 2010

August 16 - 20, 2010

Name of Child: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

Date of Birth: _____ School Grade (September 2010): _____ Sex: M F

Parent or Guardian Information

Names of Parent(s) or Guardian(s): _____

Daytime Telephone: (1) _____ (2) _____

Alternate Emergency Contact: _____ Phone: _____

E-mail address: _____

Medical and Special Needs Information

Who is in possession of this child's Health Insurance information?

Name: _____ Daytime Phone: _____

Doctor: _____ Phone: _____

Camp Awesome is committed to meeting the individual needs of each child to facilitate their full participation in Camp Awesome programming. Any information about physical, emotional, or family issues that could affect a child's participation would be helpful.

Please identify any issues, medical or otherwise, about which Camp Awesome staff should be made aware:

Safety and Security

The safety of the children is one of the primary concerns of the Camp Awesome program. During program hours we endeavour to maintain the highest possible standards to ensure that the children in our care are not at risk. Our care and responsibility extends to ensuring that the children are returned to the appropriate guardian when our program ends.

Please identify to the coordinator who will be picking up the child at the end of the day if you will not be picking up the child yourself. If there is a specific arrangement that we need to be aware of please note it on the other side of the form, or call the coordinator.

If you need to pick a child up early for any reason, please let us know at the beginning of the day.

This child is allowed to leave Kanata United Church without an adult after the daily program is finished.

Consent and Waiver

I (we) give permission for _____ to attend Camp Awesome at Kanata United Church. I understand that, while reasonable precautions will be taken, the host congregation, the Ottawa Presbytery of the United Church of Canada, and its affiliated organizations and individuals will not be responsible in any way for injuries sustained by my child as a result of his/her participation in Camp Awesome.

I (we) understand that, in the event that medical treatment is required, every effort will be made to contact me. However, if I cannot be reached, I give permission to the staff of Camp Awesome to secure the services of a licensed physician to provide the care necessary for my child's well-being.

I further understand that photographs may be taken of my child participating in the Camp Awesome program by staff, other parents, or community news agencies. Camp Awesome and its associated agencies are not responsible for the existence or usage of third-party photos.

Signed: _____ Date: _____

Please ensure that all information on this form is complete and accurate before submitting to the Camp Awesome registrar at Kanata United Church.

Please make cheques payable to Kanata United Church.



I am available to volunteer at drop off or pick up (approx. 45 minutes).
