

# CAMPER REGISTRATION FORM 2022

IMPO	PRTANT NOTE: SPARK	SUMMER CAMP is acce	pting children who ha	ve completed Grade 1	to 6.
Child's First Name:		Last	Name:		
Gender (Circle One):	M / F Grade	e Completed (June 2022	2): Birth Da	te: MD	_Y
Mother's Name:		Fat	ther's Name:		
First	Last		First	Last	
Address: (Apt. #	) Street:			City:	
Postal Code:		Но	ome Phone:		
Parent's Email Address:	:		or		
Business Phone: Mothe	er:		Father:		
Cell Phone: Mother:			Father:		
E <b>mergency Contact</b> (Na	me and Phone Numbe	er):			
lf you would like to requ same grade group (1-3 d					g camp in the
Friend Request: Name	<u> </u>			Grade:	
To get to camp, will yo walking in		<b>ne):</b> oicked by parent/guardia	n:		
DATES & FEE SCH	IEDULE				
Please circle the	one week you wo	ould like to registe	r for camp:	Cost:	
Week 1: July 11-15	Week 2: July	y 18-22 <b>W</b>	leek 3: July 25-29	\$125.00 per ch	ild
Daily time: 8:30 a.m. Campers will be accep consecutive (ie. Week	oted for a max of 2 wee	eks. If registering for 2 v	veeks they <u>must be</u>		
AMOUNT ENCLOSED:		Pleas	e make cheques payal	ole to CALVARY BAPTIST	Г CHURCH
(1) Full fees must be red (2) NSF Cheques will be (3) Refunds will be sent an administration fee of	charged \$25.00 and to only by mail by the charget f\$15.00 per camper/on the Wednesday pressure of the wednesday pressure o	he cheque must be rep nurch office manager. R week withheld.	laced within 2 days. efunds requested afte	er June 21, 2022 will ha	•
Por Office USE ONLY Date of payment	Receipt Date and #	Credit/Debit	Cheque	Cash	Total
	·		'		

Due to the rapidly changing situation in regard to COVID-19, some camp guidelines could change between the time of registration and the beginning of camp. SPARK Camp will adhere to all current camp guidelines at the time of camp.

## SPARK SUMMER CAMP CAMPER CODE OF CONDUCT

Each camper will be asked to agree to a code of conduct while at camp. Campers who are unable or unwilling to follow the camp code of conduct may be asked to leave camp to protect the experience and safety of all participants. By signing this document, you can confirm that you have gone through these important points with your child(ren) and have confirmed they will be able and willing to adhere to these requirements while at camp.

- The camper understands they will use language that honours God while at camp (i.e. no swearing, bullying, insults, etc.), and is respectful of all campers and leaders.
- The camper understands there is a zero-tolerance policy for violence or aggressive behaviour at camp. Violence or aggression will result in the camper being sent home from camp.
- The camper understands that to get the most out of camp, they must engage at camp! The best camper experience is for the camper to engage in all activities and have a good attitude toward participation.
- The camper understands that if they are feeling ill, they must tell a leader to receive the right help that they might need.
- The camper understands they must treat the property (whether at the church or on an excursion) with respect. God has provided us great facilities to be able to enjoy camp at, and they should be treated with respect.

## MEDICAL INFORMATION and PERMISSIONS

Lniid's Name:						
Doctor's Name:			tor's Phone:			
1. Does your child have any allergies? Please Specify. (Ask for special form for campers who carry an epi-pen.)	Yes	No				
2. Is your child on any medication (Circle One)? Please Specify.		Yes	No			
3. Does your child have any MEDICAL/HEALTH NEEDS (physical,	emotiona	l, mental or	behavioural)?Pleas	se Specify.	Yes	No

### **IMPORTANT NOTE:** IN CASE OF ILLNESS OR INJURY AT THE CHURCH OR ON EXCURSIONS

Every effort will be made to contact parents. It is understood that by permitting my child to attend Spark Summer Camp, I am agreeing that Calvary Baptist Church/Spark Summer Camp, and anyone acting on its behalf, will be released from any liability for injuries to my child that may be occasioned at the camp or on an excursion via walking, and that I give permission to the Church Staff, Director(s) and Assistant Director(s) of Spark Summer Camp to make decisions in case of an emergency on behalf of my child when I am not immediately available for consultation. I am aware that I will be informed of camp excursion details prior to the event.

- \* All medical information about the camper must be completed on the application form.
- \* A camper who brings medication to camp must hand it in to the Camp Director as soon as he/she arrives at the church.
- \* All medication must be kept with the Camp Director to safeguard loss and to keep it out of the reach of other campers, with the exception of epi-pens which need to be in a 'fanny pack' on the child's person or with their groupleader.
- \* By sending your child's medications, we assume that you are giving consent to administer them according to directions.
- \* All medication must be clearly marked with: a) name of camper; b) name of medication; c) dosage; and d) how often it must be administered.

PLEASE NOTE: IF THE ABOVE REQUIREMENTS ARE NOT MET, THE MEDICATIONS WILL NOT BE ADMINISTERED.

<b>PHOTOGRAPHS:</b> From time to time, photos of the children are taken for promotional purposes. To <u>decline</u> use of photos, please check this box.	l
CONDITIONS OF ENDOLMENT	

- 1. The camp director(s) reserve the right to dismiss a camper who in his/her opinion is a hazard to the safety and the rights of others, or who appears to him/her to have rejected the reasonable controls of the camp.
- 2. The parents or guardians submitting this application are those having legal custody or guardianship over the child. Foster children require the signature of the CAS worker for attending camp, attending outings and medical forms.
- 3. I have read each page of this application form and I accept the conditions of enrolment.
- 4. I have gone through the *Spark Camp Camper Code of Conduct Related to COVID-19* attached above with my child(ren) and have confirmed they will be able and willing to adhere to these requirements while at camp. I understand that due to the regularly changing situation, guidelines may be updated prior to and during the camp week as per provincial and regional health guidelines.

Parent/Guardian Signature:		Date:	
	( <b>Note:</b> Foster children require CAS case worker signature)		

MAIL APPLICATION TO: CALVARY BAPTIST CHURCH

300 Rossland Road East Oshawa, Ontario L1G 2X1

**FAX TO:** 905 433 4734

### OR BRING IN PERSON TO THE CHURCH OFFICE

Office Hours: Mon – Fri, 9am to 5pm. Please use east entrance of the church.

Church Office Phone: (905) 433-2960