



Camp Kanannaq Program Registration Form

COMPLETE ALL REQUIRED INFORMATION.
INCOMPLETE REGISTRATION FORMS WILL NOT BE PROCESSED.

LUNA, SOLARIS, & POLARIS <input type="checkbox"/> Luna Age 5-6 *Must have completed Kindergarten <input type="checkbox"/> Solaris Age 7-12 <input type="checkbox"/> Polaris Age 13-18 Special Needs	PICK UP & DROP OFF: Prince George Family YMCA Drop off: 8:15am - 8:45am Pick Up: 4:15pm-4:45pm <input type="checkbox"/> Early Drop Off at Prince George Family YMCA 7:00am-8:15am Additional \$25 <i>*As we are not currently operating transportation, camp will run out of the Prince George Family Y Rec Room</i>	SELECT SESSION(S): <input type="checkbox"/> Session 1 June 29-July 3 (closed July 1) \$164 <input type="checkbox"/> Session 2 July 6 – 10 \$205 <input type="checkbox"/> Session 3 July 13 - 17 \$205 <input type="checkbox"/> Session 4 July 20 - 24 \$205 <input type="checkbox"/> Session 5 July 27-31 \$205 <input type="checkbox"/> Session 6 August 4 - 7 (closed August 3) \$164 <input type="checkbox"/> Session 7 August 10 - 14 \$205 <input type="checkbox"/> Session 8 August 17 - 21 \$205
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*A t-shirt is included with the cost of every session. T-shirts are given out on the last day of each session. Sizes are not guaranteed.

Due to the COVID-19 pandemic, there have been some important changes for summer 2020 Camp Kanannaq Day Camp programs. Day camps are permitted to run and will be held from the base of the Prince George Family Y Rec Room, operating at a reduced capacity. The YMCA of Northern BC continues to monitor the COVID-19 pandemic and follow direction from our Governments and Provincial Health Office.

CAMPER INFORMATION (REQUIRED FOR ALL PROGRAMS – PRINT LEGIBLY)

First name:	Last name:	
Birthdate (y/m/d):	Gender:	Age (at time of camp):
Address:	City/Prov:	
Postal Code:	Phone #:	
Email:		
Note: Email address required. Camper registration confirmation sent by email, as well as important information (packing list, newsletter, survey, updates etc).		
Parent/Guardian (A):	Home Phone #:	
Cell #:	Work Phone #:	
Parent/Guardian (B):	Home Phone #:	
Cell #:	Work Phone #:	
Alternative Emergency Contact:	Phone #:	
Custody (Parent A, Parent B, Both, Other):		
Who can pick up your child? (First and Last Name Required):		

Photo ID is required for pick up

Who **should not** be contacting/visiting/picking up your child?

We are required to have a current, good quality picture of each child. Please submit this photo with this form. Digital attachment or hard copy. Registrations without this photo are incomplete and will not be processed.

HEALTH INFORMATION (REQUIRED)

Provincial Health #:

Healthcare Coverage: BC Medical Alternative Healthcare If yes to Alternative Healthcare, attach details on separate sheet.

Child's physician's name: Phone #:

Child's dentist's name: Phone #:

Are your child's vaccinations current? Yes NoDoes your child require special medical attention or take daily medications? Yes NoIf yes, provide details:

If medication needs to be taken at camp, complete and attach the medication form found at <http://nbc.ymca.ca/wp-content/uploads/2019/02/YMCA-Camp-Kanannaq-Medication-Form.pdf>Will your child be on a medication vacation during camp? Yes NoDoes your child require any program adaptations including extra behavioural guidance? Yes NoIf yes, provide details:

ALLERGIES AND DIET RESTRICTIONS (REQUIRED)Does your child have any allergies or diet restrictions? Yes NoIf yes, provide details:

 Mild Moderate Severe AnaphylacticIf your child is bringing an EpiPen or other allergy medication to camp, complete and attach the medication form found at <http://nbc.ymca.ca/wp-content/uploads/2019/02/YMCA-Camp-Kanannaq-Medication-Form.pdf>Treatment and comments:

CONSULTATION REQUEST (Conversation with the Coordinator to occur within two weeks of receiving the completed form)I require a consultation with the Camp Coordinator regarding my child's participation. Yes No**FRIEND REQUEST AND PREVIOUS YMCA CAMP EXPERIENCE**Is this your child's first time at YMCA Camp Kanannaq? Yes No

How many years have they been a camper?

Did you register with a friend(s)? Yes NoIf yes, please provide their first and last name(s):

We recognize that campers often attend camp with friends, siblings, cousins and many other important people in their lives. The camp team does their best to honor all friend requests noted on the registration form when planning camper teams. We strongly recommend that friend requests be limited to friends of a similar age. **Our Luna program is restricted to 5-6 year olds only; siblings and friends outside this category will not be placed on Luna teams.** Our Solaris program (ages 7-12) is furthered divided into two groups, Bobcats (ages 7-9) and Lynx (ages 10-12).

ADDITIONAL INFORMATIONIs there anything we should know to ensure a positive experience for your child? (Anxiety, behavioural, etc...)

Complete all required information - Incomplete registrations will not be processed

Child's Commitment:

I want to participate in YMCA of Northern BC Camp Programs. I agree to abide by the YMCA Camp Rules. I will do my best to make this a good experience for myself and fellow children. I understand that failure to live up to this promise might result in my dismissal from the camp program. Child's Signature: _____

Parent's Commitment:

I have discussed the Child's and Parent's Commitment with my child and confirm that this child agrees to participate in the full program including field trips and lake visits by bus, to follow safety instructions, and/or refrain from behaviour that is harmful to oneself and others. I understand and support the Camp policy that prohibits the possession or use of tobacco, alcohol or non-prescription drugs and understand their use as well as abusive behaviour is cause for dismissal without refund of Camp fees.

By checking this box, I have read, understand and consent to the above.

Field Trips:

In permitting my child to attend YMCA Camp Programs, I permit my child to participate on various field trips. These may include unscheduled, spontaneous local trips walking or on public transportation or on planned outings using YMCA Transportation.

By checking this box, I have read, understand and consent to the above.

Photo and Video Consent (optional):

I authorize the YMCA to use any photos and/or videos of my child obtained while engaged in YMCA programs for promotional purposes.

By checking this box, I have read, understand and consent to the above.

In permitting my child to attend YMCA Camp Programs, I permit my child to participate in the full range of activities and authorize the Camp Coordinator or his/her appointee, in the event of accident or illness affecting this above named child to authorize on my behalf all procedures, including transportation by ambulance, admission to hospital and necessary treatment there in, as he/she may deem essential for the care and well-being of the child. It is the YMCA Camp Kanannaq's policy to notify a parent when a child is ill or in need of medical attention. When deemed necessary by staff, emergency medical help will be sought first and parents contacted second. It is understood the YMCA is not responsible for medical care or ambulance costs.

By checking this box, I have read, understand and consent to the above.

I release and discharge any and all rights and claims for damages and causes of suit or action that I or my child have at any time against the YMCA of Northern BC, Diversified Ltd., School District 57, the City of Prince George, the BC Camps Association, and BC Yukon Properties; along with their employees and agents; for any and all injuries or losses suffered by my child as a result of participating in YMCA Camp Programs. The YMCA is not responsible for any lost or damaged personal items such as clothing, electronic devices.

By checking this box, I have read, understand and consent to the above.

I, the undersigned, hereby certify that all of the information provided is true and correct to the best of my knowledge and belief. In signing this application with an electronic signature, I acknowledge and agree that such electronic signature has the same legal effect as a written signature.

Signature of Parent /Guardian (please type name): _____ Date: _____

A full list of our policies will be emailed to you when registration is confirmed and/or visit

http://nbc.ymca.ca/wp-content/uploads/2019/02/Camper_Guide_2019.pdf

Registrations without payment will not be processed. Full payment or a non-refundable \$75.00 per child is required.

PAYMENT CONTRACT

Date:	Parent Surname:	Parent First Name:
Program: Camp Kanannaq	Child's Last Name:	Child's First Name:

How did you hear about Camp Kanannaq, or what helped you decide in choosing YMCA Camp Kanannaq?

Form of pre-authorized payment:

- Void Cheque VISA Mastercard Amex Interac/ Cash (at YMCA)

I hereby authorize the YMCA of Northern BC to deduct camp fees from my financial institution or credit card on the 1st/15th or 20th of each month and a non-refundable \$75.00 non-refundable deposit at time of registration.

I understand that a service charge of \$20.00 will be charged to my child care and camp account for any returned payments.

If there are outstanding fees the YMCA will attempt to withdraw at a later date or may release information to a third party collection agency.

Refund Policy: Cancellations SEVEN DAYS prior to the session start date will receive a full refund less the deposit of \$75.00. Any changes to registrations are subject to \$25.00 non-negotiable administrative fee per session (examples include but not limited to; changing sessions.)

My child care and camp services will be cancelled if payment plan is not received within five (5) days of dated letter.

Cancellations seven days prior to the session start date will receive a full refund less the deposit per session of camp.

I have read and understand the refund will not be given if a child is sent home for misconduct.

I authorize the YMCA of Northern BC to process the above payment to be applied to YMCA Camp Programs. I have read the refund policy.

I, the undersigned, hereby certify that all of the information provided is true and correct to the best of my knowledge and belief. In signing this application with an electronic signature, I acknowledge and agree that such electronic signature has the same legal effect as a written signature.

Signature of Parent /Guardian (please type name): _____ Date: _____

The YMCA of Northern BC is committed to protecting personal information by following responsible information handling practices in keeping with Canada's privacy laws. We collect and use personal data in order to better meet service needs, to ensure the safety of our participants, to properly care for children, for statistical purposes, to assist with administration of all financial transactions, to inform participant/members about YMCA programs and to satisfy government and regulatory obligations. Program participants, registrants and member may also hear from us periodically about YMCA programs, services and opportunities that may be of interest to you. This may include philanthropic activities. We collect information that you provided to us voluntarily. We do not sell, trade or rent any of this personal information.

PLEASE COMPLETE ONE FORM FOR EACH CHILD.

Completed registration form (with signatures, photo and payment) can be submitted at the Prince George Family YMCA (2020 Massey Dr, Prince George) or emailed to Kaitlin at kaitlin.keber@nbc.ymca.ca.