



TOWN OF BLACKFALDS | Camp Curious Summer Camps
 Abbey Centre | PO Box 220 | 4500 Womacks Rd
 Blackfalds, AB | TOM OJO

REGISTRATION FORM

CAMP INFORMATION (PLEASE PRINT CLEARLY)

Camp Week# _____ Start Date _____ Age 6 - 7 Age 8 - 11

PARTICIPANT INFORMATION (PLEASE PRINT CLEARLY)

Child First Name _____

Last Name _____

Date of Birth* (MM/DD/YY) _____

Last Swim Level _____

Allergies/Dietary Needs _____

Please list any
Medical Conditions _____

Do you require a Medication
Administration Form?
 Yes No

IMPORTANT NOTE: If your child needs daily medication, please talk to one of the camp staff upon registration

Parent/Guardian
First Name _____

Last Name _____

Date of Birth _____

Mailing Address _____

Lacombe County Resident?

Town/City _____

Prov _____ Postal Code _____

Home Phone _____

Cell Phone _____

Email _____

Emergency Contact Name _____

Emergency Phone # _____

Individual #1 to pick up your child _____ Phone# _____

Individual #2 to pick up your child _____ Phone# _____

Extended Care Required? Early (8:00 am drop off) \$13.50 Late (5:30pm pick up) \$27

Please email camps@blackfalds.ca if there is anything that you would like us to know about your child.

NEXT PAGE... →



WAIVER/CONSENT FORM

I and said child do hereby agree that I and said child assume all risk of personal injury, death or property loss resulting from any cause whatsoever, including, but not limited to the inherent risk involved with the Town of Blackfalds Community Service Department programs, collision with natural or manmade objects or with other persons, or from the negligence, breach of contract, or breach of statutory duty of care on the part of the Town of Blackfalds, the Blackfalds & District Recreation, Culture and Parks Board, the Community Services Department Staff, their supervisors and instructors, directors, officers, employees, contractors, and agents (hereinafter collectively referred to as "the Town").

I and said child do agree that the Town shall not be liable for any personal injury, death, or property loss from any cause of nature whatsoever, including but not limited to, the negligence of the Town, and hereby release the Town, and waive any and all claims with respect thereto.

I and said child agree that any litigation involving injuries, death or property loss arising out of said child's participation in the Town programs shall be brought within the province of Alberta and that any and all rights, duties and obligations as between I and said child and the Town shall be governed by and interpreted in accordance with the laws of Alberta.

For your child's safety, those leaving early, walking/ biking MUST have written permission by a parent/ guardian.

Activity and Membership Refund Policy

Withdrawals that are made more than 3 days from program or lesson start date are subject to a 10% over \$100 and \$10 under \$100 withdrawal fee. This withdrawal fee will apply to each program or lesson withdrawal.

Participants will be given the option to leave a credit on their account, for up to 1 year, for future use or they may request a refund. All refunds will take 21 days to process. No refunds will be issued if withdrawal is within 3 days of the program or lesson start date. Refunds will be issued by cheque, and/or back to credit card.

Withdrawals for medical reasons are permitted with no penalty prior to program start date. If the withdrawal is after the program start date, due to medical reasons, a prorated refund will be permitted and no withdrawal fee will be levied. In both cases, refunds or credits will only be issued once a doctor's note has been received by the Blackfalds Community Services Department.

Abbey Newsletter

Please let us know if you would like to receive our monthly electronic newsletter with all of Abbey's latest news, programs and specials.

Canada's new anti-spam law requires us to obtain express consent from the public before we can send any commercial electronic messages. By checking the "Yes" box, you agree to receive commercial content from us.

Yes No

Camp Curious Handbook

As the parent/guardian I acknowledge that I have read and understand the information contained in the camp curious handbook.

Yes No

Media Consent

I UNDERSTAND photographs and/or video and/or audio recordings of me may be circulated widely and that, if posted on the Town of Blackfalds and other websites, they will be available to the public.

I further understand that the Town of Blackfalds has no control over, and is not responsible for, the use or misuse of materials including my photograph and/or video and/or audio recordings of me.

FOR THE PURPOSE STATED ABOVE, I CONSENT to be photographed and/or to be video and/or audio recorded by the Town of Blackfalds or its authorized representatives.

I ALLOW the Town of Blackfalds and its representatives to use, reproduce, publish, transmit, distribute, broadcast and display any photograph and/or video and/or audio recording that contains my image and/or voice along with my name in any Town of Blackfalds publication, multimedia production, video, CD-ROM, DVD, display, advertisement and/or on the municipality's website or other social media web sites without further notice or my approval of finished photographs and/or video and/or audio recordings.

I can, at any time, opt out of this media consent by providing written notice to Communications at the Town of Blackfalds communications@blackfalds.ca.

Please indicate your choice:

Yes No

Please email camps@blackfalds.ca if there is anything that you would like us to know about your child.

Parent / Guardian Signature

Date (MM/DD/YY)

Personal information collected on this form will be used to facilitate enrollment in programs offered by the Town of Blackfalds. This information is collected under the authority of Section 4(c) of the Protection of Privacy Act and will be protected under Part 1 of the Act. Questions regarding the collection and/or use of this information may be directed to the Information Governance Coordinator at access@blackfalds.ca or by phone at 403.885.6370.

BLACKFALDS
ALBERTA

