



# Easter Camp 2018

**Ages 5 - 12 yrs April 2 - 6**

## Swimming and Gym Activities Daily

**Camp Location:** Marystown YMCA, 255-263 McGettigan Blvd., Marystown

## Register Today!

### **In Person:**

Marystown YMCA  
255-263 McGettigan Blvd.  
Phone: 709-279-YMCA (9622)  
Fax: 709-279-0587

### **By Mail:**

Marystown YMCA  
P.O. Box 1308  
Marystown, NL A0E 2M0

# Easter Camp 2018 (ages 5-12)

Registration Deadline: March 19, 2018

April 2-6 (8:00 a.m. - 5:00 p.m.)  
\$45 per day

Our fun and educational camps focus on activities to spark your child's interest and imagination. Camps include a variety of activities to accommodate each child's individuality. This flexibility means your child can make choices and participate at their own pace.

**Note: a separate form is required for each camper.**

Camp Dates: (Check the days your child will attend:)

April 2

April 3

April 4

April 5

April 6

All payment methods are due at time of registration. Method:  Visa/MC \_\_\_\_\_ Expiry \_\_\_\_\_  
 Cash

**Refund Policy:** Two weeks notice is required except in case of illness (doctor's note is required). No refunds for missed days.

Date of Birth (month/day/year): \_\_\_\_\_

Age: \_\_\_\_\_ Nick name: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

### Parent 1 / Guardian

Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_  Private

### Parent 2 / Guardian

Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_  Private

### Emergency Contact Person: (other than parent)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Name of person(s), other than parent to whom child may be released:

1. \_\_\_\_\_

2. \_\_\_\_\_

We will not release your child to any other person unless we receive written permission from you.

Can your child swim? Yes  No

I, the undersigned, being parent/guardian of \_\_\_\_\_ do hereby give consent for the participation of my child in all activities in YMCA children's programs, including field trips, provided such activities are supervised by a YMCA staff member. I also grant permission for the YMCA to videotape and take photos of my child for promotional purposes.

Signature: \_\_\_\_\_ Relationship to child: \_\_\_\_\_ Date: \_\_\_\_\_

Has your child had all immunizations? \_\_\_\_\_

Medical Record:

Does your child have allergies? If yes, please specify:

\_\_\_\_\_

\_\_\_\_\_

Please describe the reaction and treatment:

\_\_\_\_\_

\_\_\_\_\_

Is your child receiving medical treatment of any kind? (orthopedic, psychiatric, medication etc)? If yes, please give details:

\_\_\_\_\_

\_\_\_\_\_

Does your child have special needs?

If yes, please give details:

\_\_\_\_\_

\_\_\_\_\_

**Authorization for Consent for Treatment:** Should a medical emergency arise whereby staff of the YMCA were unable to contact me, I the undersigned hereby authorize the staff of the YMCA to give consent for medical examination, diagnosis and treatment of \_\_\_\_\_ (name of child) until such time as I am notified.

MCP NUMBER: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Email Consent:** By providing my email address I consent to receiving the YMCA of Newfoundland and Labrador's newsletter and other commercial messages regarding the YMCA of Newfoundland and Labrador's products and services. Consent may be withdrawn at any time using the unsubscribe link at the bottom of the newsletter or by contacting us at info@ymcanl.com. Please refer to our Privacy Statement below or contact us at 709-726-9622 ext. 240 for more details.

PRIVACY STATEMENT: YMCA (the "Association") is committed to protecting the privacy of the personal information of its members, employees, donors and other stakeholders by following responsible information handling practices in keeping with privacy laws, including the Personal Information Protection and Electronic Documents Act ("PIPEDA") and provincial privacy legislation. The Association values the trust of those we deal with, and of the public, and recognizes that maintaining this trust requires that we be transparent and accountable in how we treat the information that you choose to share with us.

During the course of our operations, projects and activities, the Association occasionally gathers and uses personal information. Anyone from whom we collect such information should expect that it will be carefully protected and that any use of or other dealing with this information is subject to consent. The Association's privacy practices are designed to achieve this.

**www.ymcanl.com**  
Charitable Registration # 108225533 RR0001