



# YMCA DAY CAMP REGISTRATION FORM - 2020/2021

CAMPER'S NAME - FIRST / LAST		BIRTH DATE	mm/dd/yyyy	AGE AT START OF CAMP	GENDER
		/	/	YEARS	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
MAILING ADDRESS		CITY		POSTAL CODE	
APT#					

**EMAIL:**

I consent to receiving Sault Ste. Marie YMCA communications regarding my account, promotions and updates. You may withdraw your consent at any time using the contact information provided here. Please refer to our Privacy Policy or contact us for more details or contact info@ssmymca.ca . Sault Ste. Marie YMCA, 235 McNabb Street, Sault Ste. Marie, ON, P6B 1Y3, 705.949.3133 \_\_\_\_\_

1ST PARENT'S NAME - FIRST / LAST	HOME PHONE #	CELL #	WORK PHONE #
	( )	( )	( ) Ext.
2ND PARENT'S NAME - FIRST / LAST	HOME PHONE #	CELL #	WORK PHONE #
	( )	( )	( ) Ext.

LEGAL CUSTODY	CAMPER RESIDES WITH
<input type="checkbox"/> 1ST PARENT <input type="checkbox"/> 2ND PARENT <input type="checkbox"/> BOTH PARENTS <input type="checkbox"/> OTHER EXPLAIN:	<input type="checkbox"/> 1ST PARENT <input type="checkbox"/> 2ND PARENT <input type="checkbox"/> BOTH PARENTS <input type="checkbox"/> OTHER EXPLAIN:

**ALTERNATE EMERGENCY CONTACT**  
This is a person over the age of 16 who is authorized to pick up your child and can be contacted by YMCA staff when the parent/guardian cannot be reached.

ALTERNATE EMERGENCY CONTACT NAME - FIRST / LAST	PHONE #'S	RELATIONSHIP TO CAMPER	HAS CONTACT BEEN MADE AWARE THEY ARE THE EMERGENCY CONTACT?
	( ) OR ( )		<input type="checkbox"/> YES <input type="checkbox"/> NO
	( ) OR ( )		<input type="checkbox"/> YES <input type="checkbox"/> NO

**SIGN-IN/OUT AUTHORIZATION: Campers MUST be signed in and out every day. Photo ID must be presented to pick up campers. Please list yourself and all other persons who you authorize to sign your child in and out of camp. To allow camper(s) age 11 yrs+ to sign in/out please include their name below.**

1)	2)	3)
4)	5)	6)

**HEALTH HISTORY AND PERSONAL INFORMATION: The more information you can provide, the better we can meet the needs of your child. This information will be treated with confidence and respect. If you answered yes to any of these questions, please complete a Medical/Behavioural Form and /or a Consent to Administer medication form and submit at time of registration.**

Is your child under any form of treatment for an illness, condition or injury?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Does your child require 1:1 support while at school? If YES , please see Supervisor.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Does your child have any medical or behavioural conditions that we should be aware of?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Does your child need medication to be administered during the camp day?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Carries Epi-pen?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Allergies:	Food: <input type="checkbox"/> YES <input type="checkbox"/> NO Insects: <input type="checkbox"/> YES <input type="checkbox"/> NO
Other: (please explain) <input type="checkbox"/> I require a consultation with the camp director regarding elements of my child's participation.	<input type="checkbox"/> YES <input type="checkbox"/> NO

**PLEASE BRING IN A RECENT PICTURE OF CAMPER**

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**SWIM LEVEL:** Swim time is a life guarded swim. Some instructors/counselors are in the water to assist swimmers. Please check the safe and appropriate level for your child.

**Non-Swimmer:** my child will not be participating in the swim

**Limited swim ability:** my child will remain in the small pool (3-4 ft. depth)

**Swimmer:** Please choose one option:

- Shallow end/Big pool (4 ft depth-will not be permitted into deep water)
- Deep End/Big pool (up to 9 ft depth-must pass facility swim test, as per lifeguard on duty)

### CODE OF CONDUCT:

The safety of each individual in camps is of the utmost importance to the YMCA. Each camper must take responsibility to learn and follow at all times the safety and other rules established by Y staff. I understand that any behaviour of my child that places him/herself or others at risk may result in immediate dismissal from camps. I have read and agree to the Standards of Behaviour listed on the back of the form and will review this information with my child.

I have read and understand the Code of Conduct: Initial \_\_\_\_\_

### AUTHORIZATION:

Upon registration of my child at the Sault Ste. Marie YMCA Day Camps, I permit my child to participate in a full range of camp activities including off-site activities. While staff will make every reasonable effort to minimize exposure to risk, I authorize Camp Managers and their appointee in the event of an accident or illness affecting the above named camper to authorize on my behalf all procedures, including admission to the hospital and necessary treatment therein, as he/she may deem essential for the care and well-being of my child. Such action shall be taken only when immediate contact with the undersigned cannot be made. I agree not to hold the YMCA responsible for any cost arising out of an emergency situation.

I have read and understand the Authorization: Initial \_\_\_\_\_

### PHOTO AND VIDEO CONSENT:

By signing below you are consenting to the taking of photographs and/or video recordings of the above named camper by the YMCA. You are assigning to the YMCA, and waiving any rights you have related to, any such photographs and/or video recordings, and you are consenting to the use of any such photographs and/or video recordings, in whole or in part, by the YMCA.

I have read and understand the Photo and Video Consent: Initial \_\_\_\_\_

**Print Name:**

**Signature:**

**Date:**

By signing my name, I acknowledge that I have carefully read and understand the information requested in this registration form.

**How did you hear about our camp programs?** Please check all that may apply:

- sootoday.com
- saultonline.com
- Radio Ad
- YMCA Website
- YMCA Staff Member
- Billboard
- Sault Star
- TV Ad
- Word of Mouth
- Other: \_\_\_\_\_

## YMCA PA DAY CAMP REGISTRATION FORM - 2020/2021

FOR CAMPER: - First / Last

Indicate desired camp for each week; this form will remain on file throughout the camp to allow for additions / changes.

	DATE	CAMP NAME	EXTENDED HOUR CARE	AMOUNT/ DATE PAID	STAFF INITIAL
1		PA Day Camp	<input type="checkbox"/> AM <input type="checkbox"/> PM		
2		PA Day Camp	<input type="checkbox"/> AM <input type="checkbox"/> PM		
3		PA Day Camp	<input type="checkbox"/> AM <input type="checkbox"/> PM		
4		PA Day Camp	<input type="checkbox"/> AM <input type="checkbox"/> PM		
5		PA Day Camp	<input type="checkbox"/> AM <input type="checkbox"/> PM		
6		PA Day Camp	<input type="checkbox"/> AM <input type="checkbox"/> PM		
8		PA Day Camp	<input type="checkbox"/> AM <input type="checkbox"/> PM		

## YMCA HOLIDAY CAMP REGISTRATION FORM - 2020/2021

FOR CAMPER: - First / Last

Indicate desired camp for each week; this form will remain on file throughout the camp to allow for additions / changes.

	DATE	CAMP NAME	EXTENDED HOUR CARE	AMOUNT/ DATE PAID	STAFF INITIAL
1		Holiday Camp	<input type="checkbox"/> AM <input type="checkbox"/> PM		
2		Holiday Camp	<input type="checkbox"/> AM <input type="checkbox"/> PM		
3		Holiday Camp	<input type="checkbox"/> AM <input type="checkbox"/> PM		
4		Holiday Camp	<input type="checkbox"/> AM <input type="checkbox"/> PM		
5		Holiday Camp	<input type="checkbox"/> AM <input type="checkbox"/> PM		

## YMCA MARCH BREAK DAY CAMP REGISTRATION FORM - 2021

FOR CAMPER: - First / Last

Indicate desired camp for each week; this form will remain on file throughout the camp to allow for additions / changes.

	DATE	CAMP NAME	EXTENDED HOUR CARE	AMOUNT/ DATE PAID	STAFF INITIAL
1			<input type="checkbox"/> AM <input type="checkbox"/> PM		
2			<input type="checkbox"/> AM <input type="checkbox"/> PM		
3			<input type="checkbox"/> AM <input type="checkbox"/> PM		
4			<input type="checkbox"/> AM <input type="checkbox"/> PM		
5			<input type="checkbox"/> AM <input type="checkbox"/> PM		

**STANDARDS OF BEHAVIOUR**

Everyone has the right to feel safe and be safe at YMCA Day Camps. With this right comes the responsibility to respect all people involved in Day Camps and to take pride in making Day Camps a positive place.

All Sault Ste. Marie YMCA Day Camp participants are encouraged to:

- Demonstrate the YMCA core values of honesty, caring, respect, responsibility and social inclusion;
- Respect and comply with all YMCA Day Camp policies and procedures;
- Respect differences in people, their ideas, and opinions;
- Show proper care and regard for the natural world, camp property and the property of others;
- Not inflict or encourage others to inflict bodily harm on others;
- Take appropriate measures to help those in need and, if necessary, seek staff assistance to resolve conflict peacefully;
- Respect persons who are in a position of leadership;
- Respect and comply with all applicable federal, provincial and municipal laws.

**BEHAVIOUR GUIDELINES**

When a child does not follow the standards of behaviour guidelines, we take the following steps:

1. Staff directs the child to more appropriate behaviour.
2. The child is reminded of the behaviour guidelines.
3. Staff notifies the Day Camp manager.
4. If the behaviour persists, a parent is notified of the problem and the staff document the situation.
5. Staff schedules a progress check or a follow-up conference.
6. If the problem still persists, staff schedules a conference that includes the parent, child, staff, and the Day Camp manager to discuss a solution that best suits the needs of everyone.
7. If a child's behaviour at any time threatens the immediate health or safety of anyone, the parent is notified and instructed to pick up the child immediately.
8. If the problem persists and a child continues to disrupt the program, the Sault Ste. Marie YMCA reserves the right to suspend the child from the program without refund/credit.

**I have read and agree to the Standards of Behaviour, the Behaviour Guidelines and the Cancellation/Change Policies and will review this information with my child.**

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

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