



# YMCA DAY CAMP VITAL CAMPER INFORMATION - 2024/2025

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 <input type="checkbox"/> OTHER
MAILING ADDRESS		CITY		POSTAL CODE
APT#				

**Does the Camper resides at more than one addresses: YES/NO.** If yes, please fill a separate registration form for that address , if they attend camp from that address also.

**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 AND AUTHORIZED PICK UP LIST:**  
 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 IN CASE OF EMERGENCIES. Not all authorized pick up persons need to the emergency contacts:

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

**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 behavioral 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
Does your child 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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**STANDARDS OF BEHAVIOUR: We understand that feelings and needs are hard to express, but everyone has the right to participate, feel safe and be safe at the YMCA camps. The following are steps we all need to take to make the camp a positive space:**

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

**Steps we take when a child does not follow the standards of behavior:**

- Step 1: Counsellor will direct child to more appropriate behavior and remind child of the guidelines and rules of camp
- Step 2: Counsellor notifies Supervisor and documents incident(s)
- Step 3: A staff notifies parents/guardians by phone numbers on file and describes the incident
- Step 3: A staff member will then discuss the incident and possible strategies to prevent that behavior with the authorized pick-up person
- Step 4: If the problem persists to 3 incidents - the Supervisor will notify parent/guardian and the child must be picked up immediately and will not be allowed to return for the rest of the week or summer, depending on the severity of the behavior/incidents documented

If a child behaviour at any time threatens the immediate health and safety of anyone, the parent is notified and instructed to pick up the child immediately and cannot return to camp. The Sault Ste, Marie YMCA reserves the right to suspend the child from camp for the rest of the season.

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

**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 behavior of my child that places him/herself or others at risk may result in immediate dismissal from camps. In this case, Myself or another emergency contact can be contacted to pick up the child.

I have read and agree to the Standards of Behavior 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 the Day Camp Supervisor 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 they 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 \_\_\_\_\_

**VOLUNTARY 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 \_\_\_\_\_

**CANCELLATIONS AND REFUNDS:**

Cancellations 7 days prior to the start of the program: A refund minus the refund fee of \$ 20.00 will be issued. Less than 7 days prior: Refunds minus the refund fee of \$20. 00 will be granted for medical reasons only. Written notice of the cancellation as well as a medical certificate must be approved by the Supervisor to qualify for a refund.

Refunds will not be issued if the camper is removed from the camp program at the choice or request of the camper or camper's parent(s)/ guardian(s) or is dismissed from camp for contravention of camp guidelines or the camp code of conduct for behavior. YMCA Camp reserves the right to cancel programs at any time due to inadequate registration situations outside the control of the YMCA of such as the in-operability of the site, health reasons, or other unforeseen circumstances.

**Print Name:**

**Signature:**

**Date:**

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