



Camp Information

Junior Camp: Ages 4 – 7 (must be attending grade Primary in the fall of 2019)

Senior Camp: Ages 8 – 11

Camp Dates: July 2nd – August 23rd, 2019

Camp Time: Monday – Friday, 9:00am-4:00pm*

Cost: \$50/week or \$15/day or pre-registered and paid by Thursday before

\$20/day drop-in (must be paid at drop-off)

\$30/day trip days (Pre-registration is required)

Payment methods: cash, cheque (issued to Canning Recreation), or e-transfer

Drop-off location: Glooscap Elementary School**

- Be sure to bring at least **two snacks, a healthy lunch, and water bottle** to provide needed **energy** throughout the day

- Bring **sunscreen*****

- Wear appropriate clothing for weather; bathing suits and towels recommended every Friday

*Regular drop-off times are 8:45am-9:00am and regular pick-up times are 3:45pm-4:00pm; early drop off available between 7:30am-8:45am, late pickup available between 4:00pm-5:15pm. Arrangements are only accepted in advance (minimum Thursday before camp week) for an additional \$5/family/drop-off and pick-up arrangement.

**Junior Camp will take place at Glooscap Elementary School and Senior Camp will take place at Glooscap District Arena; but drop-off and pick-up will always be at Glooscap Elementary School for BOTH CAMPS except on days when camp is held in Kingsport – drop-off will be at the Lloyd Memorial Community Centre. An authorized parent/guardian MUST make contact with camp staff at pick-up AND drop-off times.

***CDRC staff have a responsibility to ensure protection from UV rays and will assist in sufficient application of sunscreen unless parent/guardian specifies otherwise

PLEASE NOTE: Registration and payment for camp will need to be confirmed and received NO LATER than 9:00pm on the Thursday of the preceding week; failure to do so will result in a drop-in fee charged instead of preregistered fee as well as no guarantee for special drop-off or pick-up arrangement.

Important Dates:

July 2nd: First day of camp

July 18th: Kingsport

July 24th: GET AIR!

August 1st: Kingsport

August 5th: No Camp

August 9th: NO CAMP

August 15th: Kingsport

August 22nd: Day Trip

Camp Registration Dates

Child's Name: _____ Age: _____

Please check the appropriate camp below:

JR Camper (age 4-7): _____ SR Camper (age 8-11): _____

Please indicate which day(s) your child will be attending Activity Camp.

		Monday	Tuesday	Wednesday	Thursday	Friday
July 2 nd – 5 th		NO CAMP				
July 8 th – 12 th					Bookmobile	
July 15 th – 19 th					KINGSPORT	
July 22 nd – 26 th				GET AIR DAY TRIP		Bookmobile
July 29 th – August 2 nd					KINGSPORT	
August 5 th - 9 th		NO CAMP			Bookmobile	NO CAMP
August 12 th – 16 th					KINGSPORT	
August 19 th – 23 rd			Bookmobile		Atlantic Splash Adv DAY TRIP	

I will need early drop off at _____ (time) on the following dates: _____

I will need late pick up at _____ (time) on the following dates: _____

Parent #1: _____ Parent #2: _____

Primary Ph: _____ Primary Ph: _____

Secondary Ph: _____ Secondary Ph: _____

Email: _____

Child's Name: _____

Emergency Contact: _____ Ph: _____

The following people are authorized to pickup my child: _____

Pertinent allergies/medical information: _____

Please note: while we make every effort to accommodate all children in our programming, we understand not all children will be successful in the traditional summer camp program setting. As a result, you are welcome to send your child with one-on-one support to help gain the best summer camp experience for them. Please contact the Recreation Office to discuss any behavioral concerns you may have or steps for success for your child that we can implement at summer camp.

Please read the following and sign below to indicate your understanding and agreement:

The Canning & District Recreational Commission staff is responsible for the supervision of children, including my child, during the above registered program(s), which has inherent risks. The staff reserves the right to remove any child from the program if the child's behavior is such that it interferes with the safety of themselves or others, or if the operation of the program is hindered.

I, the undersigned, do hereby agree to allow my child to participate in the stated registered program, and I further agree to indemnify and hold Canning & District Recreational Commission and its staff harmless from and against any and all liability for any injury which may be suffered by the aforementioned individual arising out of or in any way connected with his/her participation in this program. I further authorize the administration of any first aid steps that may be deemed necessary by qualified personnel.

Parent or Guardian Signature _____ Date: _____

Videography/Photography Consent: We occasionally take photos or video to document programs or activities which could then be used in our educational or promotional materials. Permission is granted for CDRC to use still photographs or video for this participant for these purposes only.

Yes: _____ No: _____ Participant's Name: _____

Parent/Guardian Signature: _____

Forms can be returned via email: intern@canningrecreation.com, in person at our camp registration night on June 13th at Glooscap Elementary School or at our office at 9845 Main Street, Canning.