

# Waiver Form

I \_\_\_\_\_ am the parent/legal guardian (the parent) of \_\_\_\_\_ (the student) who has my permission to attend and participate in Saga Day Camp at Chartwell Baptist Church.

The student hereby agrees to abide by the behavioral guidelines for the camp and the parent agrees that in the event that the student fails to comply with the guidelines or behaves in such away as to cause damage to persons or property while at Saga Day Camp, the student may be sent home at the parent's expense and the parent shall be responsible for any costs incurred in rectifying any damage caused by the student.

The parent hereby authorizes the administration of any first aid treatment that may be deemed necessary by any of the Chartwell staff. In the event of a more serious medical emergency affecting the student, the Chartwell staff shall make all reasonable efforts to contact the parent. Where attempts to contact the parent are not successful or are not feasible due to the urgency of the situation, the Chartwell staff is hereby authorized to obtain the services of a duly licensed physician and to secure appropriate treatment for the student. The parent hereby confirms that the student is covered by OHIP or equivalent medical insurance.

The parent and the student hereby acknowledge that there are inherent risks involved in the travel and group activities which comprise the retreat, and voluntarily elect to assume said risks as their sole responsibility. The parent and the student hereby release Chartwell Baptist Church and its pastors, leaders, servants, agents, employees, and volunteers from any and all liability, claims, damages and costs for loss, personal injury, accident, misfortune or damage to the student or his/her property while participating in events sponsored by Chartwell Baptist Church. It is understood that Chartwell Baptist Church shall take reasonable precautions to provide for the health and safety of the student.

I hereby understand that Saga is a Christian camp where campers will participate in bible lessons and/or discussions.

I authorize the use of any photos taken over the duration of the camp for non-profit promotional purposes in the future.

I give the above camper permission to travel to Lewis Bradley pool and all parks on foot, and to swim at Lewis Bradley park, over the course of the summer, as well as to travel by bus on any field trips during camp, provided I am given notice of the destination and time of the trip.

I acknowledge having read and understood each of the foregoing provisions and agree to abide by the terms of this agreement, authorization and waiver.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

While we charge \$25 per week for Saga Day Camp, the actual camp costs us \$85 per week to run. If you wish to make a donation beyond your camp fee to cover the cost of camp please indicate the amount below

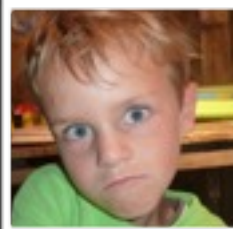
Fee: \_\_\_\_\_ (number of weeks \_\_\_\_\_ x \$25)

+ \_\_\_\_\_ (I would like to make this donation toward the costs of the running of Saga Day Camp) \*donations received.

Total: \_\_\_\_\_  Cheque  Cash

*(Please makes cheques payable to 'Chartwell Baptist Church, Clarkson Village)*

Office Use Only: Payment received by \_\_\_\_\_ Amount \_\_\_\_\_ Date \_\_\_\_\_



[www.chartwellmississauga.com/saga](http://www.chartwellmississauga.com/saga)

# Details

# Registration Form

Saga Day Camp has been providing the Clarkson community with quality summer programs for eight years. Saga is run by carefully screened and selected staff who are dedicated to providing quality children's programming. Saga is run by Chartwell Baptist Church in Clarkson Village.

**CAMP HOURS:** Supervised drop-off ~ 9:30 - 10:00am  
Camp Programming ~ 10:00am - 3pm  
Supervised pick-up ~ 3:00 - 3:30pm

**WHAT TO BRING:** Bagged Lunch, Water Bottle, Sunscreen/Hat, Comfortable Shoes



At Saga we believe that you really can't put a price on fun. For that reason, we only ask that campers pay \$25 for every week in order to contribute toward the cost of camp. If you require assistance to afford this fee, please feel free to contact Jillian Goltz or Jamie Bay to discuss other options.

### Age Specific Programming

Saga Day Camp provides fun and engaging programming for students who have completed Grade 1-6\*. Children are put into groups with programming designed specifically for their age group.  
*\*grade completed in June 2012\**

**Register Early:** Saga Day Camp can only register 80 children for each week, so register early to ensure your space. Priority is given to campers from L5J postal codes (others will be placed on a wait-list). Registration spaces will only be confirmed when payment is received.

**Absence Policies:** In order to ensure your child's safety, please let us know if they will be late or absent on any day this summer. Please note that if your child has not been attending Saga before we go on a trip, they will not be permitted to participate in the trip.

**Refunds:** Please give us **2 weeks** notice if you're child will not be attending the week they are registered in order to receive your money back. After 2 weeks, no money will be refunded, although your child can transfer weeks up until the start of camp.

**Nut Free:** Saga Sports Camp strives to be peanut free, so please do not include peanut products in your child's lunch.

### For more information please contact:

Chartwell Baptist Church Office

Tammy Pierce, 905.855.5001 x21, office@chartwellmississauga.com

Saga Day Camp Director

Jillian Goltz (Jellybean), 905.855.5001 x24, sagadaycamp@gmail.com

Chartwell Baptist Church, 1880 Lakeshore Rd W., Miss. ON L5J1J7

www.chartwellmississauga.com

(Please tear off this form and deliver or mail with payment to Chartwell Baptist Church)

STUDENT NAME (first) \_\_\_\_\_ (last) \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ POSTAL CODE \_\_\_\_\_  
BIRTH DATE \_\_\_\_/\_\_\_\_/\_\_\_\_ (DD/MM/YYYY) GENDER M / F  
HOME PHONE \_\_\_\_\_ GRADE COMPLETED \_\_\_\_\_  
SHIRT SIZE (used for trips) YS / YM / YL / YXL / AS

HEALTH CARD NO. \_\_\_\_\_

Does the applicant have any emotional, behavioural, physical, dietary, allergic or other concerns? (circle) Yes / No

If "Yes", please state VERY CLEARLY here or attach a note of explanation.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

GUARDIAN 1 NAME: \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

GUARDIAN 2 NAME: \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

ALTERNATE EMERGENCY CONTACT

NAME \_\_\_\_\_

DAYTIME PHONE \_\_\_\_\_

RELATION TO CAMPER \_\_\_\_\_

### SIGN IN/OUT INFORMATION

Can the above stated camper walk home alone? **Y / N** \_\_\_\_\_ (Initial)

List the names of any adults who have your permission to sign your child out.

(Any names not on this list will be unable to sign the camper out without a handwritten note)

\_\_\_\_\_

### CAMP SESSIONS (\*Four Day Week)

Please check the weeks you would like to register for:

Week 1: July 2 - 5\*     Week 2: July 8-12     Week 3: July 15-19

Week 4: July 22-26     Week 5: July 29 - Aug. 2     Week 6: Aug 6-9\*

Week 7: Aug. 12-15\*

(please turn over)