



# Day CAMP 2024 Registration Grades 1 – 6 (born 2012 - 2017)

July 15-19 / July 22-26 / July 29- Aug 2 8:30am-3:00pm daily

Family Ministries, Calvary Baptist Church 300 Rossland Rd. E. Oshawa 905-433-2960

## Child (ren) Info

First Name	Last Name	Age	Birthdate	Grade	Gender
			M D Y		M / F
			M D Y		M / F
			M D Y		M / F

Doctor's Name \_\_\_\_\_ Doctor's Phone \_\_\_\_\_

Are there allergies that we need to be concerned with? Yes / No If yes specify which child and special need

Are there meds or an epi-pen carried with the child? Yes / No If yes complete a separate Epi-pen consent form

Special needs (behavioural / emotional / physical)? Yes / No If yes specify which child and special need

- \* All medical information about the camper must be completed on the application form.
- \* A camper who brings medication to camp must hand it in to the Camp Director as soon as he/she arrives at the church.
- \* All medication must be kept with the Camp Director to safeguard loss and to keep it out of the reach of other campers, with the exception of epi-pens which need to be in a 'fanny pack' on the child's person or with their group leader.
- \* By sending your child's medications, we assume that you are giving consent to administer them according to directions.
- \* All medication must be clearly marked with: a) name of camper; b) name of medication; c) dosage; and d) how often it must be administered.

**PLEASE NOTE: IF THE ABOVE REQUIREMENTS ARE NOT MET, THE MEDICATIONS WILL NOT BE ADMINISTERED.**

## Friend Request (request to be in the same group as a friend who is in the same division)

## Parent / Guardian Info

Father's First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Mother's First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Home phone \_\_\_\_\_ Email \_\_\_\_\_

Father's Cell \_\_\_\_\_ Mother's Cell \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Do you regularly attend a local church? YES / NO If so, name of church \_\_\_\_\_

How did you hear about S.P.A.R.K. Camp? \_\_\_\_\_



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## CAMPER CODE OF CONDUCT

Each camper will be asked to agree to a code of conduct while at camp. Campers who are unable or unwilling to follow the camp code of conduct may be asked to leave camp to protect the experience and safety of all participants. By signing this document, you confirm that you have gone through these important points with your child(ren) and have confirmed they will be able and willing to adhere to these requirements while at camp.

- The camper understands they will use language that honours God while at camp (i.e. no swearing, bullying, insults, etc.), and is respectful of all campers and leaders.
- The camper understands there is a zero-tolerance policy for violence or aggressive behaviour at camp. Violence or aggression will result in the camper being sent home immediately.
- The camper understands that to get the most out of camp, they must engage at camp! The best experience is for the camper to engage in all activities and have a good attitude toward participation.
- The camper understands that if they are feeling ill, they must tell a leader to receive the help they may need.
- The camper understands they must treat the property (whether at the church or on an excursion) with respect.

I have read and understood the code of conduct. Parent Signature \_\_\_\_\_

## Parent or Guardian Consent

As parent(s) and /or guardian(s), I/we do here authorize treatment under the direction of a licensed physician of the above minor(s) in the event of a medical emergency which, in the opinion of the attending physician, may endanger his or her life, cause disfigurement, physical impairment, or undue discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach me/us at the phone number(s) listed above. The undersigned assumes the responsibility for any costs connected with such treatment and hereby released Calvary Baptist Church where the child attends **S.P.A.R.K. Day CAMP** or on an excursion via walking, from any responsibility.

I/we do hereby give the child / children listed on this form permission to participate in the S.P.A.R.K. Day CAMP from Calvary Baptist Church. I/we understand the possibility of unforeseen hazards and know the inherent possibility of risk. I/we agree not to hold Calvary Baptist Church or any of its leaders, or assistants liable for damages, injuries or loss incurred.

### Conditions of Enrolment:

1. The camp director(s) reserve the right to dismiss a camper who in his/her opinion is a hazard to the safety and the rights of others, or who appears to him/her to have rejected the reasonable controls of the camp.
2. The parents or guardians submitting this application are those having legal custody or guardianship over the child. Foster children require the signature of the CAS worker for attending camp, attending outings and medical forms.
3. I have read each page of this application form and I accept the conditions of enrolment.
4. I have gone through the *Spark Camp Camper Code of Conduct* above with my child(ren) and have confirmed they will be able and willing to adhere to these requirements while at camp.

### Photographs:

Occasionally photos of the children are taken for promotional purposes. (in the community, at Calvary and online) With your signature, permission is given to use these photos for this purpose only. Circle to decline NO

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

Registration fee \$160 per child per week

**Please circle the week (s) you would like to register for camp: (max 2 weeks – consecutive only - not 1 and 3)**

Week 1: July 15-19

Week 2: July 22-26

Week 3: July 29-Aug 2

### PLEASE NOTE:

- (1) Full fees must be received to reserve your place at camp (postdated cheques must be dated on or before June 21, 2024)
- (2) NSF Cheques will be charged \$25.00 and the cheque must be replaced within 2 days.
- (3) Refunds will be sent by mail by the church office manager. Refunds requested after June 21, 2024 will have an administration fee of \$15.00 per camper/week withheld.
- (4) Registration closes on the Wednesday preceding the camp week at 12pm, as space is available.

## For Office use only

Payment Date	Receipt Date / #	Cr/Dr	Cheque	Cash	Etransfer	Total