

Full Day Camps 2019
REGISTRATION FORM

	Name(s)	Age	Gender	
1.	_____	_____	_____	July 4 th – Bakers Dozen _____
2.	_____	_____	_____	July 5 th – Christmas in July _____
3.	_____	_____	_____	August 15 th - Galaxy _____
4.	_____	_____	_____	August 21 st - Fun on the Beach _____

Name of Parent (s) / Guardian (s): _____

Address: _____

Phone Numbers: Cell: _____ Home: _____

Email **(required)**: _____

Will your child(ren) be permitted to leave on their own at 4:00 p.m.?

YES ____ NO ____

If no, with whom are they permitted to leave with? _____

In case we are unable to contact you, please provide two alternate people and residence your child(ren) may go if they become ill or have to leave the program for some reason.

Name: _____ Phone Numbers: Cell: _____

Relation to family: _____

Name: _____ Phone Numbers: Cell: _____

Relation to family: _____

Do you agree to allow the Red Brick Arts Centre, Edson Leader and Edson Anchor to take photographs of your child to be used for future publications? YES ____ NO ____

Does your child(ren) have any medical problems or are they on any medication that we should be aware of? YES ____ NO ____

If YES please explain:

Does your child(ren) know what to do if they become ill or have an attack? _____

If your child(ren) requires medical attention, are we permitted to admit them to the Edson and District Healthcare Centre or Edson Hospital? YES ____ NO ____

Family Doctor: _____

Alberta Health Care #: _____

Does your child(ren) have any allergies? YES ____ NO ____

If YES, please fill out the allergy form attached.

Cost \$50.00/week/child: Paid: YES ____ NO ____

Red Brick Arts Centre & Museum staff will not be responsible for any lost or damaged items, and injuries sustained at the camp. Refunds will not be granted for any cancellations, unless notice is provided one week prior to the start date of camp.

Parent (s)/Guardian (s) Signature: _____