**2023-2024 School Year Registration Form**

RR1 Condor, Alberta

 fantasiar@youthhq.ca

**Member Information**

First and Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preferred Name: 򅚡*Same* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender: \_\_\_\_\_\_\_\_\_ DOB (mm/dd/yy): \_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address (including postal code) \*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \* (if rural, legal land description or 9-11[blue sign] address *required*)

Mailing Address: 򅚡*Same \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Allergy or Medical Concerns: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medications: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Immunizations up to date? Yes No

As of Fall 2022, my child is in grade \_\_\_\_\_\_\_ at this school: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Primary Contact Information *This person is the registering parent.* *This is the first person we will contact.*

First & Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Numbers: Cell-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address (*or legal land description*): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code:\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Secondary Contact Information *This is the second person we will contact.*

First & Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Numbers: Cell-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address (*or L.L.D with postal code*): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Additional Emergency Contact Information If we cannot reach the primary and secondary contacts, we will contact this person

First & Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Numbers: Cell-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work-\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Acknowledgement**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby authorize the Club personnel to administer emergency medical assistance to my child in the event of sudden illness or injury. I also agree to pay for any costs that may arise as a result of the need for medical treatment. I consent to Club personnel escorting my child on outings in the town of Condor, AB (ie. playground, school gymnasium)

\*I consent to the use or display of any **photographs** or **video** of my child on the Club’s premises or in connection with any advertising or promotional activities of the Club, including those with online accessibility**. 򅚡** No photographs please.

I hereby agree to hold the Condor Boys & Girls Club free and blameless from any claim for injury or stolen items on the Club’s premises or in connection with any Club activity.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Witness Sign: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*As per legislation, this form may be reviewed by Licensing or Accreditation staff.*

These persons are authorized to pick up my child:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Guardian Initials\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Guardian Initials\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Guardian Initials\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Guardian Initials\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Guardian Initials\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Guardian Initials\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Guardian Initials\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Guardian Initials\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Guardian Initials\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Guardian Initials\_\_\_\_\_

\*Staff have the right and responsibility to ID anyone other than primary contact to ensure the safety of the children. We will only accept Government issued ID, and if the adult picking up is not able to produce said identification the child(ren) will not be released and primary contact will be called.

**Is there a custody agreement for this child**? Yes No

If yes, is a current copy on file? Yes No

These people are **absolutely not** authorized to pick up my child:

.

Please provide a security question and answer so our staff can identify you as the child’s guardian incase of requesting changes to pickup list.

Q:

A:

# Pick Up Authorization

 **2022-2023 Participation in Club Membership & Club Activities** Informed Consent

*Please read carefully.*

**Where:** Locations in Condor including but not limited to: Charlotte Small Elementary School, Club Facility and Property, Parks and Playgrounds

**When**: During regular club hours 3:15pm-6:15pm. Activity schedule is posted at Club. Specific times are posted on the Club door.

**Mode of Transportation**: On foot/or Club Bus transport

**Supervision**: CBGC staff and volunteers will supervise participants at a 1:15 or better ratio

It is my understanding that participating in the programs and recreational and other activities of the Condor Boys and Girls Club (Hereafter known as CBGC) is a privilege. I understand that if my child needs to leave the Club or any CBGC activity for not correcting inappropriate behavior, a refund will not be issued. Prior to my child’s participation in such activities, I acknowledge that there are inherent risks associated with the activities, including, by way of example, physical injury due to activity-related accidents, or even loss of life. In addition, I acknowledge that there may be other risks inherent in these activities of which I may not be presently aware, and that all appropriate precautions will be taken for participant safety.

By signing this Informed Consent Form, I expressly warrant that the minor named is capable of withstanding both the physical and mental demands of the activities discussed above. I also expressly assume all risks of the minor participating in the activities, including physical injury due to transportation-related accidents, whether such risks are known or unknown to me at this time.

I recognize that there may be occasions where the child named above may be in need of first aid or emergency medical treatment as a result of an accident, illness, or other health condition or injury. I do hereby give permission for agents of the Condor Boys and Girls Club to see and secure any needed medical attention or treatment of the child named above, including hospitalization, if in the agent’s opinion, such need arises. I also agree to pay for any costs that may arise as a result of the need for medical treatment.

I hereby release and discharge the Condor Boys and Girls Club and each of their staff, volunteers, and representatives (hereafter referred to collectively as the CBGC) and agree not to sue the CBGC. I further agree to identify and save harmless the CBGC against any and all liability, cost (including without limitations legal costs), claims, damages, actions and causes of action of whatever nature or kind which might arise from or in connection with the participation of the said minor (including without limitation in regard to any personal injury, illness, death, property damage, or financial loss or other loss suffered ) me/us or other family member or dependent arising directly or indirectly from the participation of the said minor, whether foreseen or unforeseen and regardless of the cost thereof or reason therefore including without limitation negligence or partial negligence on the part of the CBGC.

**PAYMENTS/CANCELLATIONS:** Prepayment is required when the child is signed up for days attending the club programs. A non-refundable **$20 membership fee** (valid for 12 months from date of received) is due **in advance** of a child attending any CBGC program. A $35 fee applies to all NSF cheques. Requests for refunds must be made in writing to the Youth HQ accounting department. If your child/ren cannot attend the days set ahead of time on the projected attendance sheet provided you will be charged for the day regardless hereby known as a No Call No Show fee which is Before School, After School and PD days $9, $12 and $35 per day.

**PROMOTIONAL MATERIAL**: The CBGC reserves the right and permission to publish, reproduce, distribute and /or otherwise use any still or moving photograph, for such purposes and with such frequency as it shall determine in its sole discretion without further compensation or consideration to me and without further authorization by me for, as yet, unnamed video or photographic projects (including promotion, marketing and social media) which shall constitute the sole property of the CBGC. The CBGC shall be released from and against any and all liability resulting from its use of the photos or related to my use of the product.

 I do not give my permission to use my child’s photograph

The Condor Boys and Girls Club will maintain all member files in a confidential manner. Pertinent information may be shared professionally with a Condor Boys and Girls Club staff member, a representative of Child and Family Services, or a Licensing officer. Communication of member information to persons or agencies other than those listed above will require express written approval of the member’s parent/guardian.

I represent that I am the parent/guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who is under 18 years of age. I have read the permission/waiver form and am fully familiar with the contents thereof. I give permission to the named minor to participate in the activities of the Condor Boys and Girls Club. In consideration for allowing the participation of the child in the activities of the Condor Boys and Girls Club, I hereby consent to permission/waiver, including release of liability above, on behalf of the child, and agree that this permission/waiver shall be binding upon me, my family, heirs, legal representatives, successors, and assigns.

Signature of parent/guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Registration for the 2023-2024 Program will not be processed without signatures on this consent form.

Written name of parent/guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Important Information for School Year 2022-23**

* **Acceptable forms of communication for No Call No Show/other**

 Email

 (fantasiar@youthhq.ca)  \_\_\_\_\_ (initial)

* **Please send these items daily with your child as our activities can change.**

 Hat/Gloves/Coat/Snow pants \_\_\_\_\_ (initial) Water Bottle \_\_\_\_\_\_ (initial)

* I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ acknowledge that my child/ren will be engaging in messy play/art and will send my child with “play clothes” \_\_\_\_\_ (initial)
* Pickup time will be no later than 6:15 pm \_\_\_\_\_ (initial)
* In lieu of volunteer hours, I will provide snack once for 25 children \_\_\_\_ (initial)

**Membership Agreement**

My child and I have read and understood the rules and regulations of the Condor Boys & Girls Club, including fee structures, volunteer commitments, and expected behaviors while at the Club. We agree to follow the guidelines provided and understand that failure to do so may lead to dismissal of the member from all programs.

We hereby request that he or she be accepted as a member of the Club.

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

Parent/Guardian Signature Child Signature

**Office Use Only (Date and Initial)**

Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Membership Fee Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Added to Schedule: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Processing Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| * Member Roster
 | * Online Database
 | * Billing System
 |
| * Portable Files
 | * Allergy List (if necessary)
 | * File Created
 |

**Sign Upon Completion**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Optional Applicable Details**

Has your child attended group care before?

Any concerns regarding your child’s development (ie. emotional, vision, hearing, speech, language, mobility) or behavior that you believe we should be aware of? If so, how can we provide additional support?

Any particular fears or stressors that your child may encounter at the Club? If so, how can we provide additional support?

We love to hear stories about our families- *their culture, traditions, heritage, structure, and more!* Is there anything you would like to share with us about your family?

Additional information you think we should consider so we can make the Club a positive experience for your child?

* I have received my parent/guardian handbook \_\_\_\_ (initial)

Additional parent handbooks are available at all times in the boot room

* I agree to participate in a parent/guardian orientation with Club staff \_\_\_\_ (initial)

OR

* I am familiar with and understand all program policies at the Club and my rights and responsibilities as a member \_\_\_\_ (initial)
* I understand that information regarding my child and/or family will NOT be shared without written permission from me \_\_\_\_ (initial)

**Welcome back!**

* I am familiar with the program policies at the Club and our rights and responsibilities as members and families.
* I know who to ask or where to get the information I need regarding my child’s experience at the Club.
* I would like more information about how I/my family can be more involved in the Club.

# Returning Families

# New Families

**Supplementary Information to Maximize Your Child’s Experience at the Club**

*Statement of Inclusion: The Clearwater Boys and Girls Club welcomes diversity and we promote total acceptance: not tolerance.*