

**Beddington Heights Before and After School Program Summer Camp- Registration Form**

**\*Notices\***

- You are responsible for applying sunscreen to your child each morning before drop off. All children should arrive by 9am.
- You must temperature check and go thru the Alberta Health Daily Checklist to check for covid symptoms before drop off at camp. If your child has symptoms follow the protocols in place on the checklist; do not drop off a child that has symptoms.
- If your child starts to experience any symptoms you will be called and required to come and pick them up immediately.
- A bagged lunch and water bottle must be provided each day as we are unable to provide any food services or facilitations.
- Our hours are 700am-530pm. The doors will be open for am drop off 7am-9am and open for pm pick up 3:30pm-5:30 pm. During the day the doors are locked to ensure strangers are not entering the building to use the facilities. Please ring the adjacent doorbell at the front entrance for a staff member to let you in if you are picking up outside of those hours.

Name of Child: \_\_\_\_\_ Birthdate (Day/Month/Year): \_\_\_\_\_ Last Grade Attended: \_\_\_\_\_

Home Address for Child: \_\_\_\_\_ Circle: NW, NE, SW, SE Home # \_\_\_\_\_

Mother's Name:		Father's Name:	
Home Address:		Home Address:	
Circle: NW, NE, SW, SE	Postal Code:	Circle: NW, NE, SW, SE	Postal Code:
Home #	Cell #	Home #	Cell #
Name of Employer:		Name of Employer:	
Address:		Address:	
Circle: NW, NE, SW, SE	Work #:	Circle: NW, NE, SW, SE	Work #:
<b>*Family Email Address:</b>			

***Emergency/Alternate Contact***

Name:	Address:	Circle: NW, NE, SW, SE	
Home #	Cell #:	Work #:	Relation to child:
Person(s) to whom your child <b>MAY</b> be released:			
Person(s) to whom your child <b>MAY NOT</b> be released:			
<i>Note: Court documents are required if a parent is listed in the may not be released category.</i>			

***Subsidy***

\_\_\_\_\_ I currently have subsidy. Please provide child id number: \_\_\_\_\_

\_\_\_\_\_ I am planning to apply for subsidy. You must bring in or provide a copy of your approval by the 1<sup>st</sup> day of camp.

**1. Medical Information**

Is there any relevant information about the abovementioned child’s medical history (including allergies, medications, behavioural needs or patterns, serious illness, sensitivities, or diet restrictions) that we need to know about?

Are the child’s immunizations up to date? YES OR NO (circle one: either or does not affect registration)

**2. Declarations**

- I will temperature check my child with a thermometer at home and go thru the Daily symptoms checklist before coming to the center in the morning.
- I have received or looked at of a current Parent Handbook. I understand and will comply with the terms of ALL of the Beddington Heights Before and After School policies and procedures; which includes but is not limited to: **Child Guidance Policy, Operation Schedule, Registration and Fees, Health Policies and Emergency Procedures** to name but a few.
- If my child continues with inappropriate behaviour to the point where he/she is physically, emotionally, or verbally abusive to the children or staff, means for suspension and/or immediate program dismissal will be directly implemented and discussed with the parents. **Fees are non-refundable for children suspended or dismissed from the program.**
- Toys and games (which include electronics) are **NOT ALLOWED** to be brought to camp.
- **I understand that I must give 2 weeks’ notice if I am withdrawing my child from care or I will forfeit my weekly fee.**

**Waivers:**

1. **Medical:** I hereby consent to any medical attention (emergency or otherwise), care or treatment considered necessary by the Manager, Directors or any other responsible adult. This will be in effect for the entire time my child is registered within the program (which could be a maximum of 7 years).
2. **Declarations:** I acknowledge, understand and will comply with all of the above information fully and by signing it agree to follow all policies and procedures during the entire course of required childcare during the summer months with Beddington Heights Before and After School Program.
3. **COVID-19:** I understand that if my child is exhibiting any symptoms of Covid-19 they are not allowed to come to camp until all symptoms are gone. I will assess my child each day before I drop off and acknowledge that staff on duty will temperature check my child each day. If my child begins to experience any Covid-19 symptoms while in care I am aware that I will be contacted to come and pick them up immediately.

Parent Signature: \_\_\_\_\_ Dated: \_\_\_\_\_ BASP Office: \_\_\_\_\_

**REGISTRATION**

Dates Open	Please mark off when you need care	Direct debit & E-Transfer	Credit Card Pre-authorized only	Payment Due Date	Closures	Cancellation Dates for no penalty
July 5-9		\$150.00	\$154.00	June 30		June 21
July 12-16		\$150.00	\$154.00	June 30		June 28
July 19-23		\$150.00	\$154.00	June 30		July 5
July 26-30		\$150.00	\$154.00	June 30		July 12
August 2-6		\$150.00	\$154.00	July 30	August 2nd	July 19
August 9-13		\$150.00	\$154.00	July 30		July 26

**Approved Payment methods listed above in chart. Please circle the method of payment you are using.**

**Cancellations by the dates listed on the far right will be refunded if already paid. Cancellations after these dates will not be refunded. Refunds will be facilitated at the latest by September 30 depending on method paid and availability of BHCA Board Members to sign refund cheques.**