

# REGISTRATION FORM - SUMMER CAMP 2025

Camper information			
Name:	Birthday (dd/mm/yy)	Age at Camp:	
Address:	City:	Postal Code:	Home Phone:
Camper information (Second Child)			
Name:	Birthday (dd/mm/yy)	Age at Camp:	
Address:	City:	Postal Code:	Home Phone:

Parent/Guardian 1		Parent/Guardian 2	
Name:	Secondary Phone:	Name:	Secondary Phone:
Email:		Email:	

Custody of Camper					
Please Specify	Parent/Guardian 1: <input type="checkbox"/>	Parent/Guardian 2: <input type="checkbox"/>	Both: <input type="checkbox"/>	Joint: <input type="checkbox"/>	Other: <input type="checkbox"/>

Emergency Contact	
Name: (other than parent/guardian)	Preferred Contact number:
Name: (other than parent/guardian)	Preferred Contact number:

Who is authorized to pick up the camper at the end of the day? (check all that apply)			
Please Specify	Guardians: <input type="checkbox"/>	Emergency Contacts: <input type="checkbox"/>	Other: <input type="checkbox"/>

**Medical Information**

Please describe any allergies or medical needs your child's camp staff should know about:

Please list any medications that your child requires while at camp:

**Behavioral/special needs:**

Please describe any behavioral needs that your child's camp staff should be aware of:

**Camp Selection**

Week Dates:	# of campers attending	Camp Fee: \$200 per camper, \$120 for WK 1 \$160 for Wk 6	Total
WK 1 - July 2 - 4** Wednesday - Friday			
WK 2 - July 7- 11th			
WK3 - July 14 - 18			
WK4 - July 21 - 25th			
WK5 - July 28th - Aug. 1st			
WK6 - August 5 - 8th** Tuesday - Friday			
WK7 - August 11-15th			
WK8 - August 18 - 22nd			

All registrations are due by noon on the Thursday prior to the camp session. Sheet can accommodate 2 campers. Additional forms can be photocopied or downloaded through our pdf on our website [www.stationarts.ca](http://www.stationarts.ca). Incomplete applications will result in delay of your registration. First come first served, space is limited.

**Payment/Authorization****Payment options:**

- Payment in Full (can be paid with etransfer, cheque, debit/cash or credit card)
- Extended Payment for multiple weeks (must include a credit card or void cheque for future payments)

Note: July camps MUST be paid in full by June 1st, 2025

August camps MUST be paid in full by July 1st, 2025

**Photo Consent**

I understand that photography, images or recordings containing my child's picture may be used for promotion on the Station Arts Centre website; social media, including Facebook and Instagram; and other marketing and promotional materials for the Station Arts Centre such as brochures, posters, mailers etc. By checking "yes" I am granting my permission

- Yes
- No

## Cancellation/Withdrawal policy

All cancellation requests must be submitted by email directly to the Program Coordinator at [tverbuyst@stationarts.ca](mailto:tverbuyst@stationarts.ca) with the subject line "Withdrawal Request" followed by your camper's first and last name. Cancellation requests received 10 business days prior to the affected camp will be subject to a full refund. Cancellation requests received less than 10 business days prior to the camp week will forfeit any possible refund. Cancellations due to a medical reason will be evaluated on a case-by-case basis. Refunds may take 2 - 3 weeks to process and will be given back to parents in a cheque.

## Authorization

I permit my child to participate in all activities offered in the program. In the event of an accident or illness affecting my child, I consent to having the Station Arts Centre Staff authorize any necessary procedures, including admission to hospital, as may deem essential for the care and wellbeing of the participant. Such action is to be taken only when immediate contact with the parent/guardian or emergency contact cannot be made. If my child presents any symptoms of illness, COVID 19/Measles, we will be following Public Health Guidelines by isolating the child, and asking parent/guardian to pick them up. If a child is sick, or has symptoms that are aligned with COVID 19/Measles and asked to leave, I understand that I will not receive a refund for the remainder of the Program.

Although I am aware that the Station Arts Centre (Tillsonburg District Craft Guild) takes all necessary precautions to ensure the health and safety of my child/children. I agree not to hold the organization or agents responsible for any loss, injury, or accident suffered in connection with activities. Therefore, I understand all the risks involved in my child's participation in the Station Arts Centre Program and accept full liability.

The Station Arts Centre (Tillsonburg District Craft Guild) takes great care in providing a safe environment for the children. I and my child recognize that the rules of the Station Arts Centre must be obeyed in order to maintain a safe environment for fellow students and staff. I and my child recognize that any behaviour that may cause harm to my child, or others, may result in immediate dismissal. In a situation where my child/children are not acting within the established code of behavior of the organization, I understand that I will not receive any refund for the remainder of the program. This includes the child following and adhering to the new guidelines put in place by the organization to ensure the safety of all participants, visitors and staff.

Special needs must be addressed ahead of time to ensure we have qualified staff on hand. If there is a support worker assigned, we welcome the worker to attend with the child. The Station Arts Centre will not administer any medication to the child/children, with the exception of EpiPens in emergency situations. If a child requires medication during their time at the Station Arts Centre, it is the parent's responsibility to ensure that the child takes their medication at the required time.

All children registered in the Stations Arts Youth Programming must be able to use the washroom by themselves. If children need assistance in this area, they are required to have a parent/guardian or support worker with them.

**I have read, understand, and accept the Station Arts Centre Program's policies as described in this waiver and I have read and understand all information PDF.**

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_