

MACAULAY TREE HOUSE

SCHOOL AGE SUMMER PROGRAM REGISTRATION FORM 2022



| | | | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--------------------------------|--|-----|--|--|
| CHILD'S NAME | | | | | Birthdate | | Age | | |
| Mother/Guardian's Name | | | | | Father/Guardian's Name | | | | |
| Home Address | | | | | Home Address | | | | |
| Town/Postal Code | | | | | Town/Postal Code | | | | |
| Home Phone # | | | | | Home Phone # | | | | |
| Work Name & Address | | | | | Work Name & Address | | | | |
| Town/Postal Code | | | | | Town/Postal Code | | | | |
| Work and Cell Phone # | | | | | Work and Cell Phone # | | | | |
| E-mail address: | | | | | E-mail address: | | | | |
| Name of Doctor, Address and Phone # | | | | | | | | | |
| Does your child have any allergies or medical concerns? (allergies, medications, medical conditions, etc.) *Anaphylactic allergies and/or medications require further documents - please contact the office* | | | | | | | | | |
| Does your child have any food restrictions? | | | | | | | | | |
| Does your child require a support worker while attending summer camp? (Please circle) YES NO *If yes, please contact the office | | | | | | | | | |
| Who may pick up your child from the program? (children may be released only to persons over 18) | | | | | | | | | |
| Emergency Contact and Phone #1 | | | | | Emergency Contact and Phone #2 | | | | |

One-time Registration Fee: \$5.00 Daily Fee: \$38.00 JK/SK \$37.50 Grade 1-6

| Please check <input checked="" type="checkbox"/> below the camp days you are requesting | | | | | | OFFICE USE ONLY | |
|-----------------------------------------------------------------------------------------|----------------|----|---|----|---|-----------------|--|
| DATES | DAYS ATTENDING | | | | | TOTAL FEE | |
| | M | Tu | W | Th | F | | |
| July 4 - July 8 | | | | | | | |
| July 11 - July 15 | | | | | | | |
| July 18- July 22 | | | | | | | |
| July 25- July 29 | | | | | | | |
| Aug 1 - Aug 5 | | | | | | | |
| Aug 8 - Aug 12 | | | | | | | |
| Aug 15 - Aug 19 | | | | | | | |
| Aug 22 - Aug 26 | | | | | | | |
| Aug 29 - Sept 2 | | | | | | | |

Please Note: Any child attending on a trip day that is not registered for the full week will be charged a trip fee

| |
|------------------------------------------------------------------------|
| Please note custody arrangements if applicable- DOCUMENTATION REQUIRED |
| Please note any other pertinent information with regard to your child |

I give permission for (child's name) _____ to participate in the School Age Summer Camp Program and field trips, according to the monthly calendar, offered by Macaulay Tree House Day Nursery. I have received, read and understand, and will abide by the policies and procedures as presented in the Macaulay Tree House School Age Program Parent Handbook.

Consent to photograph: I give permission to Macaulay Tree House to photograph my child for use by Macaulay Tree House and the participating families only. **(please circle) YES NO**

On occasion, during special events, local media may photograph camp activities. Please inform the office at (705) 645-1953 if you have concerns, and we will make accommodations.

Children are required to bring their own labeled sunscreen . If your child forgets, we can with parent/guardian permission. (please circle) YES NO

Occasionally we may be on a field trip where we may need to use hand sanitizer provide with parent/guardian permission (please circle) YES NO

In previous years we were able to run a summer camp program out of VK Greer Public school as well as Macaulay Public School. Please note, running out of Vk Greer will depend on staff and the number of children enrolled. Would you like your child to attend the VK Greer location? (please circle) YES NO

A COMPLETED PAD FORM IS REQUIRED TO CONFIRM SPACE

Payments will be withdrawn from accounts as per our bi-weekly PAD schedule.

10 business days notice of cancellation is required - a \$5.00/day administration fee will be charged

Parent/Guardian Signature _____ Date: _____

Supervisor Signature _____ Date: _____

Macaulay Tree House School Age Programs

Phone: 705-645-1953

Fax: 705-645-5846

schoolage@macaulaytreehouse.ca