



CHEP Sprouts Garden Day Camp: Registration & Waiver Form

August 15th-19th, 2022

Ages 8-12

Registration

Participants Full Name:

Date of Birth: _____ **Health Card #:** _____

Allergies:

Medications (including Epi-Pens):

Medical Condition(s):

Other:

Parent/Guardian Name: _____

Contact Phone: _____ **Email:** _____

Parent/Guardian Name: _____

Contact Phone: _____ **Email:** _____

Emergency Contact: _____

Contact Phone: _____ **Email:** _____



Waiver

1. I hereby acknowledge the risks that my child may be exposed to at camp include, but are not limited to:

- *Kitchen hazards:* knives, ovens and stoves, kitchen equipment
- *Outdoor/Gardening Risks:* sun, heat, insects, garden tools, lifting and bending
- *Sporting & Play Activities:* running, jumping, playing, swimming (supervised by a lifeguard)
- *Social:* Other CHEP/Station 20 West clients, guests, and campers
- *Travel:* travel to/from other destinations and activities

2. It is my desire for my child to participate in the programs and activities offered at CHEP Good Food Inc.'s 2022 Garden Day Camp and acknowledge this waiver releases CHEP Good Food from liability in case of any loss, injury or illness that might arise in connection with day camp activities.

3. I agree to discuss personal safety and risk with my child prior to the start dates of the camp including managing personal health issues, allergies, and medication; sunscreen, hats & hydration; respect for staff, and making friends with others – CHEP staff will also discuss these matters with campers and review safety protocol where relevant.

4. I assume all risks of participation voluntarily and acknowledge I may withdraw or limit my child's participation at any time from any activity and will communicate that to CHEP staff in advance.

5. I acknowledge that in the event my child needs medical attention, if neither a parent/guardian nor the emergency contact can be reached, CHEP staff will seek medical attention on my child's behalf.

6. I accept that CHEP Good Food reserves the right to cancel my child's participation in a camp session if their behaviour is deemed unmanageable or dangerous to themselves or others and that no refund will be issued in such a case.

Parent/Guardian Print: _____

Parent/Guardian Signature: _____ Date: _____