

C.L.A.S.S of West K Spring Camp Enrolment Form

Please ensure you have read and signed the entire form. If you have any questions please contact Donna at donna@classwestk.org or 250-808-3930

The contents of this enrolment form will be considered valid by Class of West K for 18 months after it is signed. Please check the box that best applies to you below:

Option 1. If you wish to fill out a new form next time your child is enrolled for a camp program (If you think the information you have provided will change between now and the next 18 months) please check the box below.

Option 2. If you wish to use the information, waivers and permissions you have provided and agreed to in this form for all camps that your child(ren) may attend within 18 months, please check the box and sign below.

(For option 2 only) I acknowledge and agree to be legally bound by the waivers signed in this form for my child(ren) for any future camp programs my child(ren) may attend at Class of West K within 18 months of this form's completion.

Initial _____

Please sign below:

Parent/ Guardian full name _____

Signature _____

Date _____

Camper information:

Child(ren)'s Full Name(s): _____

Age: _____ Grade: _____

Home Address:

Parent/guardian full name(s) and Phone Numbers

Name:

Email address: _____ Number: () -

Name:

Email address: _____ Number: () -

Emergency contacts: (please ensure these contacts are **aware** they are emergency contacts for your child at Class of West K)

Name: _____ Number: () -

Relationship to child: _____

Name: _____ Number: () -

Relationship to child: _____

Security password for pick ups: (must be known by all people who will pick up)

Allergies or medications (do we need to administer? Please provide information)

Any other information we need to know? (Accommodations etc)

Doctor's name and phone number:

Dates you would like your child(ren) to attend program:

*******Out of province phone numbers and reaching parents:*******

Some of our staff DO NOT have BC phone numbers.

Our staff with Non BC numbers have consistently had a very difficult time reaching parents and emergency contacts. For your child(ren)s safety, please pick up and let your emergency contacts know to pick up ALL calls from all Canadian area codes. Specifically BC numbers and calls from area codes 587 and 204.

INFORMED CONSENTS AND LIABILITY WAIVERS

I parent/ legal guardian of _____,

hereby give my approval and consent for my child(ren)'s participation in all activities prepared during the selected camp, including but not limited to swimming activities, sports, use of Class of West k's facilities and local community facilities. I

agree that participation in any activities and use of any facilities is entirely at my own risk.

Initial

I hereby agree to assume all risk, expenses and hazards incidental to the conduct of all activities, events, use of Class of West K facilities, and community facilities. I understand and agree that use of any facilities and participation in any activities come with a risk and agree to forever discharge, waive, release, absolve and hold harmless Class of West K and all its employees, volunteers, owners, insurers and representatives from any and all liability for injuries, damages, loses and death arising out of traveling to, participating in, or returning from any and all camp activities. Including but not limited to swimming activities, use of playground equipment, Class of West K and local community facilities.

Initial

I hereby agree to assume all risk for all acts of active and passive negligence on the part of the company on account of physical injury, mental anguish, death and or property damage arising from any accident, loss, damages or injuries suffered by my child(ren), myself or others resulting from, connected with or caused by my/ our use of the CLASS of West K services and facilities, including but not limited to: use of public swimming pools, water parks, natural water sources, playgrounds, activities, any injury resulting from mechanical defects or failure of any equipment or devices used in such services/ facilities.

Initial

I parent/ legal guardian of _____ have read the entirety of the waiver above, fully understand it and agree to be legally bound by its terms.

Parent/ Legal Guardian full name: _____

Signature: _____

Date: _____

Swimming permissions:

I give permission for my child(ren) to participate in swimming/ water activities.

This may include swimming in local lakes, local swimming pools, water parks and water attractions. (YES NO)

My child(ren) is/are required to wear a life jacket which I will be providing (YES NO)

If filling out one form for more than one child with different requirements please make a note of the differences here:

If answered **YES** to requiring a lifejacket:

1. I agree that if my child **DOES** require a lifejacket and **I DO NOT** provide a lifejacket/ there are none available to use, I will allow my child to go into the water up to their waist. (YES NO)

2. If I **do not agree**, I understand that my child(ren) **will not** be allowed to participate in any swimming activities. (YES NO)

Parent/ Guardian full name: _____

Signature _____

Date _____

Class of West K Transportation permissions and waiver

Please read and sign the following form and circle yes or no to the following questions.

Please note if you are uncomfortable with the forms of transport available, you may have to drop off/ pick up at location or miss that day of service.

Permissions

By signing this form you agree to give your child(ren) permission to take alternate forms of transportation in the event our school bus is unavailable.

All drivers of personal vehicles have a valid class 5 license and all bus drivers have a valid class 4 unrestricted license.

I parent or legal guardian of _____ give permission for Class of West K to transport my child(ren) in their personal vehicles in the event the Class of West K bus is unavailable. **YES NO**

I give permission for Class of West K to take my child(ren) on the public bus system in the event the Class of West K bus is unavailable. **YES NO**

My child is required to use a booster seat (provided by Class of West K) at all times whether in the Class of West K bus or personal vehicles. **YES NO**

In the event personal vehicles must be used to transfer my child(ren), my child meets the legal requirements for and has permission to sit in the front seat. **YES NO**

Waiver

I give permission for my child(ren) to be transported in a motor vehicle driven by the Individual and or public bus service identified to an event at the specified location. I understand that my child is expected to follow all applicable laws regarding riding in a motor vehicle.

Initial _____

I recognize that by participating in this activity, as with any activity involving motor vehicle transportation, my child may risk personal injury or permanent loss. I hereby attest and verify that I have been advised of the potential risks, that I have full knowledge of the risks involved in this activity, and that I assume any expenses that may be incurred in the event of an accident, illness, or other incapacity, regardless of whether I have authorized such expenses.

Initial

As a condition for the transportation received, I, for myself, my child, my executors and assigns, further agree to release and forever discharge Class of West K, it's owners, the employees and volunteers from any claim that I might have myself or that I could bring on my child's behalf with regard to any damages, demands or actions whatsoever. Including those based on negligence, in any manner arising out of this transportation. I have read this entire waiver and permission form, fully understand it, and agree to be legally bound by its terms.

Initial

By signing below, I acknowledge that I have read the entirety of all waivers and permission forms, fully understand them, and agree to be legally bound by its terms.

Parent/ Legal Guardian full name: _____

Signature _____

Date _____

Payment methods and policy

Payment via bank transfer is preferable, however if that does not work for you, we accept e-transfer and credit card (will incur bank charges). Payment is due at the

beginning of each month. (If paying by credit card or bank transfer, we will charge you at the beginning of the month).

Please select the box that applies to you: (If you are an **existing client** and we have your information on file, you do not have to fill out the details below, unless your method of payment has changed. However, please select the method you would like to use).

I would like to pay by bank transfer

I will pay by e-transfer to (donna@classwestk.org)

I would like to pay by credit card (transaction fees apply)

Bank transfer details

Name of Client _____

Email address _____

Cell number _____

Name of institute/bank _____

Transit number _____

Institution number _____

Account number _____

I authorize CLASS of West K to withdraw funds from my bank account to cover the cost of my child's summer camp fees.

Fees need to be in CLASS of West K's bank account on the first business day of each month, they will be drawn from the client's bank account five business days prior to the first business day of each month. We use Rotessa for this process.

In the event that there are insufficient funds and the payment is rejected, a NSF fee of \$30.45 is payable per declined transaction. Payment will then be taken via an on file credit card; this payment will include a 3.5% fee, 15 cents per transaction and the \$30.45 NSF fee.

All of these fees are charged by the bank not CLASS of West K.

Name of Client _____

Signature _____ Date _____

Credit card details

Name on Card _____

Credit Card Number _____

CVC _____

Expiry Date _____

Email address _____

Postal code _____

Refund/ Cancellation policy

Staffing is based on the number of children attending each day and canceling a day or blocks of days after signing up will cause the loss of monies already paid for those days. Please be sure you actually need the days you have requested before signing up. The camp is carefully planned out using the age and number of children attending, it is not a drop in service.

Payment for each day is to reserve a spot for your child(ren), it is not for attendance. If your child misses a day, we are unable to refund the date unless we can find a replacement to fill your child's spot. At which point if we find a replacement, we can either refund the amount or credit it to future dates.

I have read and understand the cancellation policy.

Signature: _____

Daily requirements and rules of service

We want to ensure your child is safe and having fun while in our care. These are the things your child will need with them every day to ensure that happens.

Activities and outings are open to DAY OF changes. Please pack all of the following every day, regardless of scheduled activities to ensure your child is able to participate in all activities. Please make sure all of your child(ren)'s items are labeled with their names.

Note: If your child does not come with the items below everyday, and we have to buy said items for your child(ren), the price of that item will be added to your charge.

- **Water bottle**
- **Picnic style lunch (NUT FREE/ no warm up)**
- **Change of clothes**
- **Clothes that are appropriate for the weather**
- **Indoor shoes AND socks to wear in the center**

Late drop offs:

If your child is going to be late in the morning, please ensure you have contacted us to let us know and give us a rough ETA. We can usually accommodate late drop offs however there is a chance you will have to drop your child to our outing location.

We **CANNOT** accommodate early drop offs.

Early pickups:

Early pickups are fine, however, we cannot guarantee we will be at the center when you want to pick up. Please let staff know what time you want to pick up and if we are not back by that time, we will let you know where you can meet us.

Late pickups:

Pick up time is 4:00 pm sharp. Please make sure before service begins that you have made the appropriate arrangements for your child to be picked up at 4:00pm. For every 5 minutes you are late, an extra fee of \$5.00 will be added to your charge in fairness to staff.

Sending home/ ending services

Class of West K reserves the right to send children home or end services if we are given good reason.

Our priority is to keep all children in our care safe. If your child is behaving in an unsafe manner or one that limits our ability to provide the needed supervision to other children, they will be sent home.

If behavior does not improve, we may have to end services out of fairness to other clients and our staff.

I have read and understand the above terms of service

Signature _____

Date _____

If you have any questions please contact Donna at donna@classwestk.org or 250-808-3930.