

Participant



Information Sheet

Name	First, Last	Age:	Birthdate:	Pronoun.		
	FIISL, Last		 ##/##/## Month, Day, Year	Preferred		
Address:		Postal Cod	e: Contact Phor	Contact Phone:		
	# Street			Include Area Code	(####) ###-####	
email Contact (s):						
Emergency Contact Ir	nformation:					
Name:		Phone:	Relations	hip:		
Primary/First Cont	tact First, Last		de Area Code(####) ###-####			
		Phone:	Relationsh	nip:		
2 Name:	First, Last		de Area Code(####) ###-####			
,						
In the unlikely event of	a medical emergency, a s	taff person may be i	required to call emergency services	. Please provide the	participant's	
health card number a	nd the two-letter version	code to expedite th	ne process should it arise.			
Health Card #:		Version	n Code#:			
**Please answer the	•					
Will your child need t	to take any medication w	hile at camp?	Yes No			
If yes, which ones:						
Describe any allergies o	or medical conditions the s	staff need to be awa	re of to ensure participant's succes	s during program. [f	Note: Partici-	
pants requires one-on-	one support are expected	d to bring a support	person to the camp each day. Plea	ase advise staff at ti	me of regis-	
•	от от разование от разова		, p = 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10			
ration.]						
Wa wauld lika ta baa	r how you found out abo	out our camp and if	you have attended before ?			
we would like to flea	i now you round out abo	out our camp and in	you have attended before !			
Camp Selection(s):						
Build Your Ride	July 8 - 12	WAITLIST			\A/A \T CT	
Pixel Peepers	July 8 - 12	\$225	Level Up!	July 22 - 26	WAITLIST	
	Discovery July 15 - 19	\$225	Kitchen Wizards			
Kitchen Wizards	July 15 - 18	WAITLIST	Woodworks for Trades	Aug 6 - 9	\$300	
	•	WAITEIST	Clear For Take Off	Aug 12 - 16	\$250	
Filmmaking 101	July 29 - Aug 2					
	** Camps	are subject to appli	icable taxes upon registration **			
	** Re	gistration is not cor	nfirmed until fees are paid *			
		* All Camps ar	re 9:00 - 3:30 pm			
	Dron off	·	and Pick up is before 3:30 pm			
г		_		o ole		
L	Early Drop Off Requir	eu 8:00 - 8:45 am	Additional Charge: \$10 for w	еек		
Γ	Late Pick Up Required	1 3:30 - 5:00 pm	Additional Charge: \$15 for w	eek		



Participant



Agreements & Consents

Please read through the following agreements with your child so they are aware of their responsibilities and rules of conduct.

Responsibilities & Rules of Conduct

Students are expected to:

Conduct themselves in a manner that does not harm or threaten harm to;

- The proper functioning of the college courses, programs, and activities
- The rights, safety, and well-being of members and guests of the college
- The property of the college

Refrain from:

- assault/threat or assault or conspiracy to assault/threaten assault
- harassment or discrimination in contravention of the principles articulated in the Ontario Human Rights Code, Criminal Code of Canada, the Canadian Charter of Rights and Freedoms and policies and operating practices of the college
- theft, defacement, or destruction of property
- Unauthorized entry of trespassing
- Using abusive language
- Using drugs other than those for medical purposes
- Behaviour or demeanor unsuitable or detrimental to the learning environment
- Being under the influence of alcohol

Abide by reasonable instructions, given orally or written, by any college official authorized to secure compliance with such policies operating practices procedures, regulations, and rules including all health and safety guidelines and policies.

I hereby consent to the above identified participant's enrolment in Career Samplers and agree to abide by all rules and regulations of the Career Samplers for Youth program ("Career Samplers"). I understand that if I break any of the rules, I will be asked to leave Career Samplers without the possibility of refund of fees. I am aware that breaking the rules and regulations may result in my exclusion from any future Career Samplers programs. I understand that Confederation College is not responsible for injury including death sustained at Confederation College.

I authorize the staff of Confederation College to act for me according to their best judgement in any circumstances which the participant may require medical attention that may include but not be limited to first aid procedures, and attendance with the participant at a hospital. I agree to release indemnify and save harmless Confederation College, its Board if governors, Officers, employees, representatives, agents, assigns and licensees, as well as any other government ministry, agency, organization, company, or individual directly or indirectly connected with Confederation College or Career Samplers, from any cause of action, claim, lawsuit, charges, damages, demand, loss, cost, expense or judgement, resulting in any injury including death, or damage to property, that may be caused by negligent or deliberate acts or omissions of the named participant, or sustained by the named participant, while engaged in any activity connected with Confederation College or Career Samplers, whether on or off the Confederation College Premises.

I understand the consent in the conditions of enrolment as noted above. In addition, as parent/guardian of the participant, on my own behalf and on his/her/their behalf.

I authorize the use of photographs taken by Confederation College for current an or future advertising (including website and media coverage).

Participant Name:	Parent/Guardian Name:
Date:	Parent/Guardian Signature: