

Attach photo of child here



SUMMER CAMP (5-15 YEAR OLDS) REGISTRATION 2021

General Information Sheet

CAMP WILL BE OUTDOORS ONLY, AT 1594 CONCESSION SIX RD.

Niagara on the Lake

Please note that for this year, all campers must come with a support worker that is familiar with all areas of care.

We will be offering limited spots, so please prioritize the weeks you would like and we will do our best to accommodate.

Red Roof Retreat has the right to accept or deny a registration at our discretion or to send a child home early due to health, medical or behavioural concerns.

Child's Name: _____

Parent(s) Name(s): _____

Home Phone Number: _____

Mom's Number: _____

Dad's Number: _____

Email Address: _____

Child's Mailing Address:

Child's Diagnosis: _____

Date Of Birth: _____ Age: _____ Sex: _____

Health Card Number: _____

Child's Doctor: _____ Phone: _____

Emergency Name & Contact Number (other than parents):

1. _____

2. _____

Support Worker's Name and Phone #: _____

Support Worker's Health Card# _____

Support Worker's Email _____

Health Information Sheet

Brief Description of Disability/Diagnosis: _____

Allergies: yes () no () _____

Seizures: yes () no () attach written protocol

Shunt: yes () no () _____

Behavioural Concerns: yes () *please explain below* no ()

For each of the following please check whether or not it is a problem:

Following directions_____

Fighting with others_____

Destroying property_____

Self Injurious behavior_____

Tolerance for new situations_____

Personal safety_____

Attention Span_____

Flight Risk_____

Other_____

Is there anything used as a reward or reinforcement? (EG: music, hugs, quiet times etc)_____

(please attach any behavior modification strategies, and/or document if available)

Favourite activities?_____

Medication:

() My child does not take any medication

() My child will not need medication during camp hours

() My child will need medication at camp

Please list medications below. **All medications that your child takes need to be listed, even if your child does not require medication during camp hours.*

Medication

Dosage/Time

Route

Mobility:

- ☐ Walks independently
- ☐ Uses manual chair
- ☐ Uses electric chair
- ☐ Uses walker/crutches

Toileting/Dressing/Hygiene:

- ☐ Independent
- ☐ Diapers ☐ Pull ups
- ☐ Some assistance required
- ☐ Total assistance required

Feeding/Nutrition:

- ☐ Eats Independently
- ☐ Needs some assistance
- ☐ Hand-over-hand required
- ☐ Needs total assistance
- ☐ Tube Fed (attach instructions)

Communication:

- ☐ Verbal/Speaking
- ☐ Non-Verbal/Non-Speaking
- ☐ Uses Augmentative Communication
- ☐ Sign Language

Camps run from 9:00am to 3:00pm (late charges of \$15 for every quarter hour)

Camp Price is \$180 per camper/week

Please order your preference from 1 to 4

- ☐ July 5-9
- ☐ July 12-16
- ☐ July 19-23
- ☐ July 26-30

To Register, you must complete the following steps:

1. Complete Application Form and email to recreation@redroofretreat.com
2. Once you have been contacted and have your schedule confirmed, send in photo of child, signed waivers and payment.
Payment can be cheque, etransfer or credit card.

Confirmation and receipts will be issued when above requirements are complete.

We are unable to issue refunds without adequate notice or a doctor's note if applicable. However, IF we are able to fill the spot, we will reimburse you.

Consent and Waivers

I/we the parent(s)/guardian(s) are aware of this application and are in agreement with the above application requirements (ie. Application acceptance, child's photo, payment of fees and waivers to be signed). I/we are aware of the nature of Red Roof Retreat's programs and give consent for my/our child to participate.

Name(s) *please print*: _____

Signature(s): _____ Date: _____

Photo/Video Release

I, _____, consent to the use of any photos or videos taken of my child during Summer Camp.

Name(s) *please print*: _____

Signature(s): _____ Date: _____

Oath of Confidentiality

To demonstrate respectfulness to others, I/we agree to keep confidential all information concerning other children/families being served by the Red Roof Retreat Summer Camp program.

Name(s) *please print*: _____

Signature(s): _____ Date: _____

Release and Indemnification

In consideration of Red Roof Retreat accepting within the application, I, _____, parent/guardian of _____, agree to indemnify and hold harmless Red Roof Retreat, its servants, volunteers, agents or employees and all other organizers, sponsors, representatives and any other person or organization assisting in this Summer Camp program from any claims, demands, damages, actions or causes of actions arising out of or in consequence of any loss, injury or damage to my person or my property incurred while attending at or participating in the Summer Camp, notwithstanding any such loss, injury or damage that may have risen by reason of the negligence of Red Roof Retreat, its servants, volunteers, agents or employees and all other organizers, sponsors, representatives and any other person or organization assisting in this Summer Camp program, arising out of or in consequence of the attendance or participation by _____ at the Summer Camp operated by Red Roof Retreat.

Name(s) *please print*: _____

Signature(s): _____ Date: _____

**Thank you for registering for
Red Roof Retreat's
Summer Camp 2021**

Please print and keep this sheet for helpful tips & information when preparing to send your child to camp.

Drop Off & Pick Up

- ✓ Summer Camp starts at 9:00am and ends at 3:00pm each day at 1594 Concession Six Road, Niagara on the Lake. Please so not arrive early as staff will not be ready.
- ✓ **We will be outside or under a tent all day!!**
- ✓ Each child and support worker must sign in at the screening station prior to exiting their vehicles. Please be patient as there may be a line up.
- ✓ ***Late fees** of \$15/15 minutes will be applied for any late pick ups
- ✓ If your child will be absent for a day of camp or if there is a change in plans regarding who will pick your child up, please call the camp Supervisor (name and number will be provided to you on the first day of camp).

PLEASE CHECK our facebook page prior to leaving for camp each day to check for any changes. We will not be providing refunds if camp has to change due to heat advisories, weather warnings or covid related issues or outbreaks.

Daily Supplies

*Each day, your child should bring the following **labeled** items to camp in a **labeled** bag:*

- ✓ Lunch and drinks packed with an ice pack
- ✓ Water bottle
- ✓ Change of clothes
- ✓ Bathing suit & towel
- ✓ Reusable swimmers for campers who are incontinent
- ✓ Hat
- ✓ Sunscreen
- ✓ Bug spray

**You (parent and/or support worker) will be responsible for checking that you have all your child's belongings at the end of the day. We are not responsible for lost items.*

**** For campers who require a feeding tube or medication, please write out clear instructions along with daily supplies and pack in Ziploc bag or container labeled with child's name. Please note that ALL medications MUST be in an original pill bottle with an up to date, readable label from the pharmacy.**

At the beginning of each day, please apply sunscreen and bug repellent to your child before they arrive at camp. Support workers will be expected to reapply these after swims and/or before going outside. All support workers should do a thorough tic check prior to leaving camp each day.

Thank you for your cooperation!