

Building Belonging Registration





Form

PARTICIPANT INFORMATION

Return to the Magnus Eliason Recreation Centre (MERC) at 430 Langside Street

Name: (First Name) Age: Birth Date: (Month/Day/Year) Address: (House/apartment #) (Street)	(Last Name) Gender:
(Month/Day/Year) Address:	
Address:	
(1000)	(Buzz Code) (Postal Cod
Grade: School:	
Parent/Guardian Name(s):	and
Relationship with Child:(Mother, Step-Father etc)	and
Phone Number:	And/ Or
(Circle One: Home / Work / Cell)	(Circle One: Home / Work / Cell)
Emergency Contact Name:	
Relation to Child:(Aunt, Grandparent, Friend, etc)	Phone Number:
MEDICAL INFORMATION	
Is this participant currently on any medication? If so	please specify.
Does this participant have any allergies or medical co	nditions? If so, please specify.
Does this participant require use of an Epi-Pen? If so Provide staff with a completed Epi-Pen Authorization	•
DIETARY GUIDELINES AND RESTRICTIONS	
Does this participant have any food restrictions?	



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TRANSPORTATION-Please indicate your choice by marking an "X" in the boxes below

- We can provide free pickup and drop-off for kids, ages 6-12, in the Spence Neighbourhood.
- Staff will take all possible measures to keep children safe but will not be liable for children who intentionally leave during drop-in or structured programs. Parents who request safe walk/drive should instruct their child to stay with staff during all programming.
- If children refuse to go with walk/drive home, or their actions make it unsafe for others, SNA reserves the right to deny youth safe walk/drive home and parents will be called to pick up their children

• Safe Pick-Up after school John M King Sister MacNamara Walk/Drive Home 5:30-6:30pm		
OR My child is free to come and go from program on their own- by checking this box SNA will not be		
responsible for transporting your child to and from program		

EXCURSION RELEASE

Release

By signing below you give permission for your son/daughter to participate in the "Building Belonging" program. This includes participating in programming at the MERC or planned outings (such as swimming, bowling, going to the movies etc.). By signing below I give permission to the Spence Neighbourhood Association to take my children on outings as part of the building belonging program.

I understand that SNA is not responsible for any accidents that may occur or for children who choose to leave programming without informing staff. Should these situations occur, appropriate action will be taken and parents/guardians will be contacted immediately.

PHOTO WAIVER

In consideration of my/our child's participation as outlined above, I/we agree to the following:

- 1. I/we agree to hold harmless The Spence Neighbourhood Association and third parties authorized by it (herein collectively referred to as the "SNA") with respect to any and all losses, including any litigation expenses, legal fees, damages or costs that may be incurred by SNA in the event that my child pursues legal action against SNA arising from the use and publication by SNA for editorial, trade, advertising, promotion, social media or any other lawful purpose in any manner or medium, of any photographs, videotapes, motion pictures, audio recordings or any other recordings, images or likenesses of my child taken while he/she is participating in a media broadcast and/or being photographed as outlined above (herein referred to as the "Images").
- 2. In addition, I/we agree not to sue SNA for any losses incurred personally by myself/ourselves arising from the use and publication by SNA for editorial, trade, advertising, promotion, social media or any other lawful purpose in any manner or medium, of any Images.

Please check below if you do not want your child's photo to apmaterials, or social media. () No Photos	ppear on the SNA website/newsletter, promotional
Childs Name:	_
Parent/Guardian's Signature:	Date:



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