



REGISTRATION FORM



PARTICIPANT INFORMATION	Last Name:	FAMILY/GUARDIAN INFORMATION	Parent/Guardian:
	First Name:		Relationship to Camper:
	Female Male Other _____		Address:
	Birth date: / /		City:
	DAY MONTH YEAR		Province: Postal Code:
	Age at Camp: Grade in September:		Home Phone: Work Phone:
	School:		Email:
	T-Shirt Size:		Emergency Contact 1:
	Email:		Relationship to Camper: Phone:
	Please indicate which week you will be attending:		Emergency Contact 2:
July 10-14, 2023	Relationship to Camper: Phone:		
July 17-21, 2023	Camper Health Card Number:		
August 14-18, 2023	Camper Food Allergies:		

LIABILITY STATEMENT	<p>Please be assured that the Ontario Provincial Police and all participating agencies will do their best to ensure a safe and secure environment for your child at camp. To help minimize risk to your child, we have instituted the following guidelines that will be applied to all children attending camp:</p> <ol style="list-style-type: none"> 1. The possession and/or consumption of any non-prescribed mood altering substance is strictly prohibited; 2. Intentional misbehaviour that subjects any Camp participant or their property to physical and/or emotional risk is unacceptable; and 3. Disobeying the instructions of camp staff will not be tolerated. <p>Should your child fail to abide by these guidelines, he/she may be excluded from further participation the camp and consequently, he/she may be sent home. If this occurs, you will be obligated to arrange transportation for your child and assume full financial responsibility for all resulting expenses. The OPP will not be held responsible for any bodily injury suffered by your child or for any loss, theft or damage to his/her property.</p> <p>In the event that the primary or secondary contact cannot be readily consulted about an adverse health related occurrence involving your child, your signature below grants permission for the OPP to authorize as deemed appropriate by the attending physician: hospitalization; administration of medications; and/or x-rays, tests or other treatments to include injections and/or surgery. You will be obligated to remit all expenses associated with such medical care.</p> <p>The Ontario Provincial Police (OPP) may take photographs of camp participants and related activities for promotional purposes. Should you object to the use of such photographs that depict your child, it is incumbent upon you to advise the OPP in writing 7 days before program start date. Correspondence to this effect may be addressed to the Indigenous Policing Bureau, 777 Memorial Avenue, Orillia, Ontario L3V 7V3. Failure to provide such notification assumes consent to use photographs.</p> <p>Signature of Parent/Guardian: _____ Date: _____</p>
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THINGS YOU SHOULD KNOW

Please remember to bring a sleeping bag and pillow with you as one will not be provided.

All medications are to be given to staff upon registration.

Please note all bags and luggage will be searched.

Any personal phones, MPV will be confiscated until the end of the camp.

If you have your own drum and would like to bring it, please feel free to do so.

No T-shirts or clothing that associates with gangs, encourages the use of tobacco, drugs, alcohol or violence or associated with the discrimination of age, color, nationality, sexual orientation, religion or sex will be allowed to be worn.

Telephone use is restricted to reasonable limits and established by the course Facilitator's. Under no circumstances will long distant charges be billed to the Lodge.

No outside food.

THINGS WE SHOULD KNOW

Please write a short paragraph that best describes your child. Include information regarding school, family dynamics, achievements, interests and hobbies and anything else you feel we would be important for us to know:

Signature of Parent/Guardian:

Date: