

# Guelph Contemporary Dance Festival 2012 Arts Explosion Camp Registration Form

## Camper Information *(please complete a separate form for each child attending)*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Birth (yyyy/mm/dd): \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ City/Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

## Family Information

**Parent/Guardian 1:** \_\_\_\_\_ \*E-mail: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Parent/Guardian 2:** \_\_\_\_\_ \*E-mail: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

*\*E-mail is the primary mode of communication between the GCDF and your family. By providing an e-mail address you are consenting to being added to the GCDF e-newsletter, sent approximately 10 times per year. The newsletter is where we publish information about future camp registration as well as other upcoming GCDF events.*

*I addition to the parent(s)/guardian(s) listed above, I authorize the following people to pick up my child:*

## 2012 Camps Attendance

*Please check off below which days for each of the camps this camper is attending. If your camper is attending more than one camp, only one form is required. If you require early drop-off (8:30-9:15 am) or late pick-up (3:30-4:30) please contact the GCDF office at 519-780-2220 in advance.*

	Full Week	Single Days				
		Monday	Tuesday	Wednesday	Thursday	Friday
March Break Camp <i>March 12-16, 2012</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Summer Camp 1 <i>July 9-13, 2012</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Summer Camp 2 <i>July 16-20, 2012</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Emergency and Medical Information *(if more space is required, attach a separate sheet)*

Health Card #: \_\_\_\_\_

Does the camper have any medical conditions or medications? \_\_\_\_\_

Does the camper have any special needs? \_\_\_\_\_

Emergency Contact if Parent(s)/Guardian(s) above cannot be reached: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

## Liability waiver

By signing this form, I am authorizing the above named participant to take part in the full range of camp activities offered. In the case of injury or accident of any kind at the Art Explosion Camp(s), neither the Guelph Contemporary Dance Festival (GCDF) or the River Run Centre (RRC), nor any employee, nor volunteer of the GCDF or RRC will be held liable for the occurrence. I hereby release the GCDF and RRC, its employees or volunteers from all claims or damage, which may arise out of any loss or personal injury to the named participant in this program.

I authorize that photos taken of my child by the GCDF may used for future camp promotions

Signature (please print name underneath): \_\_\_\_\_ Date: \_\_\_\_\_