

Outback Adventure

Kids On Track Camper Information

Parents/Guardians: Read carefully and complete all pages of the form. Please print clearly.
Form must be filled out completely before your camper leaves for camp.

Camper's Name: _____

FIRST

LAST

Address: _____ City: _____ Prov: _____ Postal Code: _____

Phone: (____) _____

Date of Birth: ____ / ____ / ____ Sex: M / F Age at Camp: ____ Last Grade Completed: ____
MONTH DAY YEAR

Will your child be attending any other camps this summer? _____

Emergency contact: Must be available at all times throughout camp and be able to make an emergency trip out to the camp if needed.

#1	Name: _____	Phone: _____	DAYTIME
	Relationship: _____	Phone: _____	EVENING
#2	Name: _____	Phone: _____	DAYTIME
	Relationship: _____	Phone: _____	EVENING

Medical Info:

Necessary: Alberta Health Care # _____

Optional: Alberta Blue Cross # _____

Alberta Child Health Benefit # _____

Native Treaty Card # _____

Other Insurance _____

Family Doctor: _____ Phone: (____) _____

Is tetanus vaccination up to date? Yes ___ No ___ Date of last shot _____

If applicant is female and experiencing puberty, has she started menstruation? _____

To your knowledge, does your child have a history of: (please check all that apply)

___asthma ___bladder infections ___bed wetting ___homesick tendency

___ear infections ___heart problems ___ADHD ___lactose intolerance

___other, please specify _____

If you answered yes to any of the above, please elaborate. _____

Does your child have any allergies? (please check all that apply)

food allergies insect allergies drug allergies environmental allergies

If you answered yes to any of the prior allergies, please elaborate. _____

Please rate the severity of symptoms experienced.

mild moderate severe (life threatening)

If your child is allergic and/or asthmatic please ensure the child is on **preventative medication** before coming to camp. This is extremely **important** and reduces the chance of your child becoming sick at camp.

May non-prescription medications (for example: Tylenol, Calamine Lotion, etc) be used for the treatment of minor ailments your child may experience while at camp?

Please check: Yes No

Are there any non-prescription medications/lotions that your child cannot tolerate? If yes, please list:

Please list all prescribed medication that your child will be bringing to camp. Include drug name, dose, and the times given. Ensure that your child has enough to last while away from home. It is recommended that an extra inhaler be sent with your child, if he or she uses one.

All medications at camp MUST be in individual bubble packaging with complete labeling (name, drug, dose), available from any pharmacist.

Can your child self-medicate for inhalers/'puffers' that are used as needed? Yes No

<u>Medication Name</u>	<u>Dose</u>	<u>When it is to be given</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

When dropping your child off on the day of camp, please register **ALL** medications with the leaders. Do not pack any medication in your child's luggage. If any child is found with unregistered medication it will be confiscated and you will be called.

Does your child have any special diet or activity restrictions? _____

Has your child had a recent illness, injury, operation, or been exposed to a communicable disease? _____

Conditions of Enrollment: Please discuss appropriate behaviour with your child and consequences we will be taking at camp. The following behaviors are unacceptable and will be addressed with progressive consequences including: time outs, physical tasks (i.e. pushups or running laps), writing lines, chores around camp, calls home, and camp expulsion.

1. Disrespect of leaders or other children and their property.
2. Any violence including punching, hitting, kicking, spitting, etc.
3. Bullying (i.e. swearing, teasing, or name-calling) will result in automatic expulsion from camp at the parent's expense.
4. Uncooperative and/or resistive to leaders instructions.

Waiver and Release Agreement:

1. I hereby authorize the person(s) designated by **Kids On Track Association Of Edmonton** as the health caregiver to dispense the mentioned medication to my child while he/she is at camp. In the event that my child requires medical treatment and there is insufficient time or reasonable attempts to contact me or the emergency contacts have failed, I also give **Kids On Track Association Of Edmonton** the right to obtain and consent to any appropriate medical treatment for my child.
2. I give permission for **Kids On Track Association Of Edmonton** to use any photograph/video my child is in for promotional materials.
3. **Kids On Track Association Of Edmonton** reserves the right to dismiss any camper for behavioral problems at the discretion of the Camp Director. Should my child be dismissed from the camp I understand it is my responsibility to pick him or her up that day.

In signing this waiver as the legal guardian or parent of _____, I affirm that he/she is in good physical condition and he/she is capable of participating in the program activities that will take place at the Outback Adventure Camp 2010. I am aware of all personal risks and hazards that the above named child may be subject to in the activities at this camping trip, and I fully release Kids On Track Association of Edmonton, its employees, volunteers and directors from any and all liabilities. In case of emergency, I give permission to the Kids On Track Association to secure appropriate medical treatment. I have read and completed all sides of this application form, discussed them with my child, and hereby accept the conditions of enrollment.

Date: _____

Guardian Name (please print): _____

Guardian Signature: _____

Relation to Camper (e.g. Father): _____

Phone Number: _____

Witness Name: _____

Witness Signature: _____

BRIGHTWOOD WAIVER AND CONDITIONS OF ENROLLMENT

1. Brightwood Ranch reserves the right to dismiss a camper who in the opinion of the Camp Director or designate, is a hazard to the safety of themselves or others and/or the rights of others, or who appears to have rejected the reasonable controls of camp.
2. Possession of and or use of tobacco products, non-prescriptive/illegal drugs and alcohol are strictly prohibited and will result in immediate dismissal.
3. I assume financial responsibility for my child's actions which may cause damage to camp or another's property.
4. The parent or guardians submitting this form are those having legal custody over the child. Conditions of custody, if applicable, will be fully communicated to the camp in writing , including a photocopy of the section of any court order referring to visitation rights.
5. While every precaution is taken for the safety and good health of our campers, BRIGHTWOOD RANCH, its directors and staff members, volunteers, or the employees of facilities outside of the campgrounds are hereby released from any and all liability in the event of an illness, accident or misfortune that may occur to the applicant camper. Each camper must be covered by Provincial Health or equivalent medical insurance.
6. The signature of the parent/guardian on this form shall give the Camp Director the right to arrange for any special services or other requirements necessary for the best interest of the camper and shall give the Camp Director the right to approve and obtain medical attention necessary for the camper's welfare and good health (excluding injections, anesthesia or surgery). In such situations the camp will attempt to notify the parents as soon as possible. The parents/guardians are responsible for any additional expense that may result from such services.
7. I give my permission for my child to participate in all camp activities including equine both on and off camp property, either by walking or riding in camp vehicles.
8. I am aware that activities involving horses involve many risks, dangers and hazards and also of unpredictability of horses and therefore I accept the responsibility for whatever may happen including but not limited to:
 - a. Animals which may bite, kick, buck, jump, run, or step on people
 - b. Horses which may collide with other horses or objects
 - c. Negligence of other riders or my or my child's own failure to ride safely
 - d. Equipment which may fail
 - e. Weather conditions which may change
 - f. The nature of the terrain
 - g. Activities in a remote area and injuries or illnesses which may occur
9. I give permission for any pictures/slides of my child taken during camp to be used for promotional purposes including videos and brochures.
10. I have read this form and I accept these conditions.
11. Brightwood Ranch is an interdenominational Christian camp. Campers are challenged to study the Bible and search out the meaning of a living relationship with Jesus Christ. All spiritual instruction is Bible based and presented without coercion. All staff are carefully screened and trained.

Parent/Guardian Signature

Date

“For I know the plans that I have for you says God, Plans to give you a future and a hope.” Jeremiah 29:11