



## **City of North Bay Summer Program Registration Form**

*Note: Please be advised we do not exceed 30 participants per location. The program is drop-in/drop-out, if your child arrives after 12pm the group may not be present at the program site.*

### **Site Information**

Please check which site your child will be attending:

Circle Lake		Caldwell-Ellam	
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### **Participant Information**

First Name		Last Name	
DOB		Age	
Health Card #		Parent/Guardian	
Address		Postal Code	
Home #		Work #	

Emergency Contact 1		Home #		Work #	
Emergency Contact 2		Home #		Work #	

### **Participant Medical Information**

Doctor's Name:	
Telephone:	

### **Please check if your child has any of the following:**

A.D.D.		A.D.H.D.		Athsma		Autism	
Cardiac Condition		Diabetes		Epilepsy		Epi Pen	
Food Allergy		Medications		Other			



## Things To Bring

If you plan on staying the entire time, please bring a peanut free lunch and snack, a reusable water bottle, sunscreen (if you don't want to use the Youth Centre's), and appropriate clothing for participation and special events.

Please be advised that all youth participants are required to sign-in & sign-out of the Youth Centre.  
Youth participants 7-9 require authorized pick-up. Youth 10-14 may sign-out as directed by parents.  
Please be advised the Summer Youth Centers facilitate for a maximum 30 youth per location.

## Photo Release Form

During the course of our activities there may be time when photographs may be taken of your child(ren). These photos may be used for publicity purposes or may appear in local newspapers. Please check one of the following options:

<input type="checkbox"/> I <b>DO NOT</b> authorize the City of North Bay to use photos of my child for publicity purposes.	
<input type="checkbox"/> I <b>DO</b> authorize the City of North Bay to use photos of my child for publicity purposes.	

I hereby authorize the City of North Bay to publish photographs taken of persons under my legal guardianship for use in print, online and municipal publications. I acknowledge that their participant is voluntary and that neither I nor the minor children will receive any financial compensation for use of these photographs. I further agree that my wards participation in any publication, photo, or website confers upon me or my child no rights to ownership of the original photo or the forum in which it was used. I hereby release the City of North Bay from any liability or third party claims regarding the use of these photographs.

Participants Name:	
Parent/Guardian Name:	

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

### Sun Screen Protection

<input type="checkbox"/> I <b>DO NOT</b> authorize staff to help assist my child apply sunscreen.	
<input type="checkbox"/> I <b>DO</b> authorize staff to help assist my child apply sunscreen	

**Please return Registration to Parks and Rec Department, or to Heather Bronson via e-mail.**

**If you require any further information please contact Heather Bronson at 705-474-0400 ext 2338 or by e-mail [heather.bronson@cityofnorthbay.ca](mailto:heather.bronson@cityofnorthbay.ca)**

Personal information on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act and will be used for the purpose of the After School Program and/or Youth Program. Questions about this collection or personal information should be directed to the City Clerk, 200 McIntyre Street East, North Bay (705) 474-0626, ext. 2510.