



SUMMER KIDS CAMP July 10 -14 9am - Noon



3900 Arcola Ave East 306-352-4673 www.mylivinghope.ca

Child's Name:

\_\_\_\_\_ First \_\_\_\_\_ Last

Age on July 1, 2017\*: \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade completed end of June 2017: \_\_\_\_\_  
Month Day Year

Does your child have any health concerns? YES NO If "Yes" please explain:

Is your child on any medication? YES NO If "Yes" please list:

Is your child on a special diet or have any allergies? YES NO If "Yes" please explain:

Will your child have an EPI PEN with them? YES NO N/A

Will your child have an asthma inhaler with them? YES NO N/A

Parents/Guardians: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ PC: \_\_\_\_\_

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

Email Address: \_\_\_\_\_

Emergency Contact:  check if same as above

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

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

Church normally attended: \_\_\_\_\_

\*Children must be age 4 by January 1, 2017 and potty trained. \*\*All information is for church use only.

Cost

April: 1 child: \$30 ♦ 2 or more children\*: \$25/per child

May & June: 1 child: \$35 ♦ 2 or more children\*: \$30/per child

Please make cheques payable to Living Hope Alliance Church.

\*For family discount, children must be from the same immediate family.

Waiver and Release \$2.00 fee is included in registration cost.

FOR OFFICE USE ONLY

Amount \$ \_\_\_\_\_ Cash \_\_\_\_\_ Credit/Debit \_\_\_\_\_ Cheque \_\_\_\_\_ Cheque # \_\_\_\_\_

# WAIVER AND RELEASE

In consideration of the sum of Two Dollars (\$2.00) and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned hereby releases and forever discharges Living Hope Alliance Church Regina, Inc., its employees, agents, directors, representatives, successors and assigns of and from any actions, causes of action, demands, claims and/or liabilities of whatsoever nature and kind which might arise from the activity (\_\_\_\_\_) which is incorporated herein, including any actions, causes of action, demands, claims and/or liabilities for personal injury, illness, property damage, financial loss or any loss or injury or damages of any kind whatsoever, foreseen or unforeseen, present or future, which might be sustained by the undersigned as a result of the said activity.

The undersigned also hereby agrees to indemnify Living Hope Alliance Church Regina, Inc. and its employees, agents, representatives, directors, successors or assigns on account of or by reason of any claim advanced against them or any of them, for any losses or damages sustained by them, or any of them, arising out of the said activity by the undersigned.

The undersigned also hereby consents to Living Hope Alliance Church Regina Inc. uses of pictures and/or video of the undersigned taken while participating in Living Hope Alliance Church Regina Inc. activities, for promotional purposes. Living Hope Alliance Church Regina Inc. will not use any inappropriate pictures and/or videos for promotional purposes.

This agreement shall be binding upon the undersigned and the legal representatives, heirs, assigns or successors of the undersigned.

DATED at Regina, Saskatchewan, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Name of Child

I/We \_\_\_\_\_ am/are the guardian(s) of  
(Names of parents/guardians)

\_\_\_\_\_. As such, I/we am/are executing this Waiver along  
(Name of Child)

with \_\_\_\_\_ and agree that the provisions hereof are binding on me/us.  
(Name of Child)

DATED at Regina, Saskatchewan this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature of Parent/Guardian