

CAMP RIDGEVIEW SUMMER CAMP 2018

1250 Mathers Avenue, · West Vancouver B.C. V7T 2G3 · Telephone (604) 926-9142 · Fax (604) 926-9139 · www.ericochildcareconsultants.com

[Please print & keep this list for your information](#)

REGISTRATION NOTES FOR PARENTS

Camp Ridgeview must have completed Registration/Information Forms, Photograph & permission slip for each child before your registration can be finalized. Please return the completed forms to Camp Ridgeview as soon as possible as the programme is popular and fills up very quickly! *Please complete these forms **clearly** as this information is important.*

If your child already attends Camp Ridgeview, Holly House, La Maison or Club West you do not need to complete the Information Form but we still need the Permission Slip. Please keep the other papers for information purposes.

FEES

There will be a \$30 charge for all returned cheques.
Receipts for Tax purposes will be issued in February next year.

MINISTRY SUBSIDY

If you are using Ministry Subsidy please can you make sure that the authorization is received by **Friday 22 June, 2018**. All our mail is sent to the school address, and the school closes for the summer, the mail is then held at the main Post Office until the school re-opens in September and we cannot access it until then.

REFUNDS

The Fees are non-refundable and no credit can be given after **1 July, 2018** except when your cancelled space has been filled by another child, or we receive a Doctor's note for your child. There will be no Credit given for missed days.

CHANGES

1. Once your registration has been accepted and your space has been confirmed you are not able to change your booked dates.
2. Registration for an extra week is only possible if space permits.
3. Daily or Drop-In care is not available. Full weeks only.

ATTENDANCE

1. Children must be dropped off before 9.30am in the morning and cannot be picked up until 4.00pm at the earliest. *(A note will always be left on the door saying where we are)*
2. Your child **cannot** be dropped off **before** 7.30am and **must** be picked up by 6:00pm at the latest.
3. If, for any reason, your child is unable to attend on any day please let us know before 9.00am on the day your child will be absent.

A Calendar outlining the weekly schedule will be posted inside Camp Ridgeview throughout the Summer. Please check it nightly in case there are any changes.

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SUMMER 2018 REGISTRATION FORM

Fees: \$250 p/week (Week 1 & 6 – \$235)

All fees are inclusive, no hidden extras!

Hours of Operation: 7:30am – 6:00pm

Registration is for FULL WEEKS only.

*Please circle **weeks** & **times** you require. Circle 7:30am if you will drop your child off before 9:00am. This is important for staffing purposes.*

	<i>Amount</i>
Week 1: July 2 – 6	\$235
<i>Hol Mon. 7.30am or 9.00am</i>	
Week 2: July 9 – 13	\$250
<i>7.30am or 9:00am</i>	
Week 3: July 16 - 20	\$250
<i>7.30am or 9.00am</i>	
Week 4: July 23 – 27	\$250
<i>7.30am or 9.00am</i>	
Week 5: July 30 – Aug 3	\$250
<i>7.30am or 9.00am</i>	
TOTAL JULY	\$_____
Week 6: August 7 – 10	\$235
<i>Hol Mon. 7.30am or 9.00am</i>	
Week 7: August 13 - 17	\$250
<i>7.30am or 9.00am</i>	
Week 8: August 20 - 24	\$250
<i>7.30am or 9.00am</i>	
Week 9: August 23 – 31	\$250
<i>7.30am or 9.00am</i>	
TOTAL AUGUST	\$_____

Fees can be paid weekly or monthly. We need post-dated cheques dated for the Monday of each week or the 1st of each month. We also accept cash. All cheques should be made payable to **Camp Ridgeview**.

Registrations will not be accepted without prior payment for each week booked.

PLEASE NOTE: NO REFUNDS will be given after July 1 /2018, except with a Doctor's note for your child, and no credit will be given. However weeks may possibly be exchanged, enrollment permitting.
Receipts for Tax Purposes will be issued in February 2019.

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REGISTRATION INFORMATION

*This form should be completed by the parents, custodial parent or legal Guardian.
A separate form is required for each child.*

CHILD'S INFORMATION.

Full Given Name: _____ Male / Female (*circle*)
Birth Date: (D/M/Y) _____
Medical Number: _____
Doctor's Name: _____
Doctor's Address: _____
Doctor's Phone #: _____
School: _____ Grade (*in Sept*) : _____

PARENTS OR GUARDIAN'S INFORMATION

Mother's Full Name: _____
Address: _____ City: _____ Post Code _____

Home: _____ Work : _____ Cell: _____

Father's Full Name: _____
Address: _____ City: _____ Post Code _____

(if different from above)

Home: _____ Work: _____ Cell: _____

Relationship to child (*if not parent*): _____

If divorced or separated Legal Custody of child: *Please circle:* Mother. Father. Joint.

Family E-Mail: _____

If there is anyone NOT authorised to collect your child please write their name(s) here:

HEALTH

Please indicate any special concerns, allergies, medications or chronic conditions your child may have:

IMMUNIZATION. (*delete as appropriate*)

My child has been immunized against DPT, MMR., Polio, Hib and all are up to date.
I have chosen not to have my child immunized.

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EMERGENCY CONTACTS.

Camp Ridgeview requires that you designate and authorise two people, not living at the same address but living/working on the North Shore, & preferably in the same area as you, who can be contacted in the event that you cannot be reached, or to pick up your child should you be unable to do so. They may be required to show some form of I.D. when they come to collect your child

Name #1: _____
Address: _____
Home: _____ Work: _____ Cell: _____

Name #2: _____
Address: _____
Home: _____ Work: _____ Cell: _____

EMERGENCY DISASTER PLAN

I hereby designate _____ Cell: _____
Or _____ Cell: _____
To collect my child in the case of an emergency should I be unable to do so.

Out of Province contact for natural disaster plan (*Include Country Code & Area Code*)

Name: _____ Tel: _____

EMERGENCY CONSENT

It is a requirement of the Community Child Care Facilities Act, Child Care Regulations, that the Licensee obtain an Emergency Consent Form signed by a parent or legal Guardian of each child enrolled in the licensed facility.

PERMISSION FOR EMERGENCY MEDICAL AID IN CASE OF ACCIDENT OR ILLNESS

I hereby give permission to *Camp Ridgeview Staff*
to call a physician, ambulance or transport my child
_____ to the nearest Medical Centre
in the case of accident or illness when I cannot be reached.

Signature of Parent or Guardian.

Date _____

Stick
recent
'Portrait'
Photo
Here

Suitable for use
in an AMBER
ALERT

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SUMMER 2018 BACKYARD ADVENTURES and SUNSATIONAL EXPEDITIONS!

PERMISSION SLIP

3 July - 31 August, 2018

In order for your children to take part in, and for us to transport them to and from the various activities during the Summer Camp we need your permission. Please would you sign the form below and return it to Camp Ridgeview as soon as possible. Failure to complete this form will prevent your child from joining in the activities.

I give permission for my child..... to join in with all the Summer Camp activities while at Camp Ridgeview. I give permission for my child to be transported in the Camp Ridgeview vans, which are fully insured & have car seats, to travel by public transport accompanied by a Camp Ridgeview staff member and/or to travel by bus hired by Camp Ridgeview.

Signed.....

Please print name.....

Date.....

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Below is a list of items to be brought to Camp Ridgeview on the first day your child attends. These are to be left here for the duration of your child's attendance. "Dirties" will be sent home for washing & return when necessary!

Please NAME all your child's belongings clearly as we cannot be responsible for any articles lost or stolen & it makes life so much easier for the staff!

Sunscreen

Extra clothes: T Shirt, Sweatshirt, Shorts, Socks, Shoes & Underwear - all in a named bag

Swim Suit

Towel

Hat – we will provide each child with a coloured baseball cap/hat. This should be left at Camp Ridgeview each night for the duration of your child's stay with us. These are always worn on field trips and make the children easily identifiable to us.

On a daily basis your child should bring:

A picnic style lunch (nothing to be heated or cooked). We provide two snacks per day.

A water bottle.

Please do not send money with your child. We provide treats for the children both at Camp Ridgeview and on field trips.



PEANUT ALLERGY -

Camp Ridgeview is an allergy aware zone.

A child, attending the Summer Camp this year, has a very severe peanut allergy. Epi-pen treatment is needed if affected. As a result of this please do not send peanuts, peanut butter etc with your child for lunch.