

**COOL AID SOCIETY:  
YOUTH SUMMER DROP-IN PROGRAM  
REGISTRATION FORM**

**YOUTH INFORMATION**

First name:	Last name:	
Address: (street number, street name, city, postal code)		
School:	Grade: (as of September 1 <sup>st</sup> 2021)	
Date of birth (month-day-year):	Age:	Gender: M <input type="checkbox"/> F <input type="checkbox"/> Other <input type="checkbox"/>

**PARENT OR GUARDIAN CONTACT INFORMATION**

Relationship to the youth:	Home phone:	Work phone:	Cell phone:
Mother's name:			
Father's name:			
Other, specify:			

**IN CASE OF EMERGENCY**

Relationship to the youth:	Home phone:	Work phone:	Cell phone:

**MEDICAL CONDITIONS OR RESTRICTIONS**

Are there any medical, learning disabilities or behavioural conditions that the staff should be aware of?

\_\_\_\_\_

\_\_\_\_\_

Does your child have an aid at school? Yes  No

Are there any individuals who cannot have contact with or pick up the youth?

\_\_\_\_\_

\_\_\_\_\_

**DISCLAIMERS**

_____ (initial)	I understand that my child(ren) and I, as the parent must have read, understand, and follow the guidelines for operating the centres during COVID-19.
_____ (initial)	I understand that my child will participate in activities of Cool Aid Society. These activities will take place at our Centres or at public playgrounds.
_____ (initial)	I understand that my child will be supervised while s/he is at the Centre or during activities outside of the Centre. I also understand that I will not hold Cool Aid Society responsible if my child is injured or losses her/his property.
_____ (initial)	I understand that my child may be photographed at Centre. Pictures are taken to provide Cool Aid Society with a sense of history of the youth, activities and the organization. These pictures may be used on our website, Facebook, proposals, or reports.
_____ (initial)	I understand that Cool Aid Society is a drop-in Centre and that rules must be obeyed. If your child is misbehaving the parent/guardian will be contacted regarding their behaviour and a plan will be developed to address the situation. If the behaviour persists the parent/guardian will be contacted and asked to come and get the child. If there is no improvement in the behaviour child will be asked not to return to the program.

Parent signature

