

CULTURAL PROGRAM REGISTRATION FORM

MILLWOOD PS Full Day Summer Program

222 Mill Rd, Etobicoke, ON

July 4 – 28, 2017

NO REFUND
NO TRANSFER

Participants of this Serbian cultural program are encouraged to attend ILE (International Languages) morning program run by Toronto District School Board, 9:00-11:30 AM. The cost for ILE program is \$20 flat fee for all 4 weeks. There is a separate registration form for ILE.

Serbian Cultural Program (11:30 to 4 pm)

Cost: \$95/week, exception \$76 for the first week

Includes nutritious food, drink, two snacks and various cultural activities such as active games, art, sports, drama and science.

- | | |
|--|---|
| <input type="checkbox"/> Week 1 (July 4 – 7) \$76 | <input type="checkbox"/> Week 2 (July 10 - 14) \$95 |
| <input type="checkbox"/> Week 3 (July 17– 21) \$95 | <input type="checkbox"/> Week 4 (July 24 – 28) \$95 |

Amount Paid: _____

Participant has registered in 9 to 11:30 am International Languages Program

CHILDCARE (8:00 – 9:00 AM) - OPTIONAL

Cost: \$10/week, exception \$8 for the first week

- | | |
|--|---|
| <input type="checkbox"/> Week 1 (July 4 – 7) \$8 | <input type="checkbox"/> Week 2 (July 10 - 14) \$10 |
| <input type="checkbox"/> Week 3 (July 17– 21) \$10 | <input type="checkbox"/> Week 4 (July 24 – 28) \$10 |

Amount Paid: _____

CHILDCARE (4:00 – 6:00 PM) - OPTIONAL

Cost: \$20/week, exception \$16 for the first week

- | | |
|--|---|
| <input type="checkbox"/> Week 1 (July 4 – 7) \$16 | <input type="checkbox"/> Week 2 (July 10 - 14) \$20 |
| <input type="checkbox"/> Week 3 (July 17– 21) \$20 | <input type="checkbox"/> Week 4 (July 24 – 28) \$20 |

Amount Paid: _____

For office use only Cheque Cash

TOTAL AMOUNT PAID: \$ _____

Registrar: _____

(Check payable to: Serbian Parents Association of Ontario)

Today's Date: _____ Birth Date: _____
Day / Month / Year Male / Female Day / Month / Year

Child's Last Name Child's First Name Day School Grade (June 2017)

Address City Province Postal Code

Home Phone Email: _____

Parent / Guardian Name Relationship Work / Day Phone

Parent / Guardian Name Relationship Work / Day Phone

Emergency Contact Relationship Work / Day Phone

Is this child allowed to go home alone? Yes No
(only children 10 years old and up are allowed to go home alone)

Who is authorized to pick-up your child?

Name Relationship Work / Day Phone

ALLERGIES AND MEDICAL CONCERNS

Student's Health Card Number:

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- Does your child have any allergies or medical concerns, which may affect participation in full day program? Yes No
- **If you have checked yes-** Does your child need an EpiPen? Yes No
- If YES, Your child MUST CARRY Epi Pen for personal use every day during class(es).
- Does your child have any **DIETARY CONCERNS?** Yes No

Please give more information about your child's allergy and diet in the space provided below.

Doctor's Name: _____ Phone #: _____

Serbian Language Summer Camp organized by Serbian Parent Association of Ontario follows Toronto District School Board *Safe Schools Policy* and the school's *code of conduct*. Parents/guardians are responsible for any applicable losses or costs should their child engage in misconduct, including a breach of the Board's *Safe Schools Policy* or the school's *Code of Conduct*. This could include costs for damages resulting from misconduct.

Accidental death, disability, dismemberment, or medical expenses insurance are NOT provided on behalf of students participating in this summer program. Parents are strongly recommended to purchase Student accident insurance, which provides coverage beyond that allowed by the Ontario Health Insurance Plan.

I have read and understood above conditions. By enrolling my child in this summer program, I give my consent.

Print Name of Participant or Parent/Guardian Signature Date

Media Release: I, hereby give consent to my child be filmed, interviewed, photographed or have audio or video recordings made of my child by the media (print, broadcast and on-line), and employees, agents or servants of the Toronto District School Board (TDSB) and Serbian Parents Association of Ontario (SPAo). I understand that the text or image(s) may appear in electronic form on the Internet, television, or in other publications outside of the TDSB and SPAo's control. I agree that I will not hold the TDSB and SPAo responsible for any harm that may arise from such unauthorized reproduction. Yes No