

Family Camp Application - 2016 -

Dear Families:

Thank you for your interest in BC Easter Seals Family Camp! We are so excited for more Camp Squamish Family Camp, and we are excited your family is interested in attending. We hope this camp will provide an exceptional opportunity for families to share in the fun and magic of the BC Easter Seals Camping Program.

The Objectives of a BC Easter Seals Family Camp are:

- To create a space for families and campers to cultivate meaningful relationships with each other and with other members of the BC Easter Seals Community
- To have an opportunity for families to share in recreational activities including music, swimming, outdoor recreation, and arts & crafts
- To provide a unique opportunity for families of children with disabilities to experience and share in the world of camp.

Through these objectives, campers and families will have the opportunity to develop confidence and feel good about themselves in a safe, warm, and supportive camping environment.

While at camp, families are responsible for the care and supervision of their children. Volunteer staff will be at camp, and they will be more than happy to help out under the guidance of your family.

Squamish Family Camp
November 11-13, 2016
Camp Squamish - 41015 Government Rd, Garibaldi Highlands, BC.

THE APPLICATION PROCESS

Please mail or drop off the completed application form to:

Attn: Camp Registrar
The BC Lions Society
3981 Oak Street
Vancouver, BC, V6H 4H5

Registration proceeds on a first-come, first-serve basis. A family's registration will be confirmed only after we have received ALL paperwork and payment. The BC Lions Society reserves the right to request additional documentation as deemed necessary. This registration package will help us to prepare for your family's experience at camp. Thank you for taking the time to properly complete the application.

ELIGIBILITY AND FEES:

Eligibility: In order to make camp accessible to the most amount of families possible, we are opening family camp to immediate family members only (parents/guardians and siblings). Special circumstances will be considered. Campers must be eligible for camp in 2016 (between the ages of 6 and 29 as of July 1, 2016 and have a disability).

Fees: To help cover some of the costs of family camp, the fee will be \$ 75 per participant. Families who need extra support are welcome to get in touch with us for fundraising ideas and contact information of local Lions Clubs who may be able to help. Children who are under the age of six at the time of family camp will be able to attend for free.

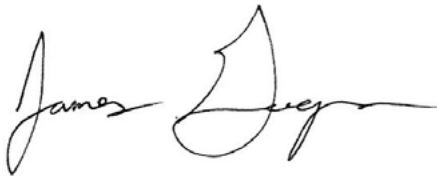
Application Check List - Please ensure you have completed the following

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Family Camp Application form - pg. 3 (1 per family)
Participant Health Sheet - pg. 4 (1 for every family member attending camp, including parents/guardians and siblings)
Camper Information Sheet - pg. 5 (1 for every child attending camp)
Signed Consent, Liability and Waiver for Children- pg. 6 (1 for every child under the age of 19 attending camp)
Signed Consent, Liability and Waiver for Adults - pg. 7 (1 for every adult attending camp)
Payment Form Completed - pg. 8 (1 per family)
Donation Request form Complete - pg. 9-10 (1 per family)

Together, we hope to create a great experience for the whole family! If you have questions pertaining to registration, do not hesitate to contact the Camp Registrar or myself at (604) 873-1865 or toll free 1-800-818-4483 or email: campregistration@lionsbc.ca.

High fives and camp smiles!



James Gagnon
Director of Camping

BC Easter Seals
Camping Program



2016 Family Camp
Application

FOR OFFICE USE ONLY

Health Sheets
Camper Info Sheets
Consent, Liability
Payment
Donation Form

Date Received
Children
Adults

PLEASE NOTE: The BC Lions Society reserves the right to change registration requirements or refuse an application. Incomplete forms will delay camper registration. A spot at camp cannot be confirmed until ALL forms have been received by mail or in person at our Vancouver office.

****ORIGINAL SIGNED FORMS ARE REQUIRED****
Facsimiles or copies will not be accepted

Easter Seals Camper Name: _____

FAMILY CONTACT INFORMATION:

Name of main contact for family camp registration: _____

Family Address: _____ City: _____

Home Phone Number: _____ Cell Phone Number: _____

Work Number: _____ Does everyone live at the same address? Yes No

Email: _____

Emergency Contact Name: _____ Emergency Contact Phone Number: _____

(This must be the contact information for someone who is not attending camp but who is available in case of emergency)

CAMP PARTICIPANTS: Please list all the members of your family that will be participating including the Easter Seals Camper.

Name	Sex	Age	Birth date	Relationship to camper (sibling, parent)	Special Diet/Allergies

Please indicate any special equipment that your family may require (hoyer lift, hospital bed) or specific sleeping arrangements necessary:

Our volunteers will be ready to greet your family anytime after 4pm on Friday, March 14th. What time do you think your family will arrive?



The British Columbia Lions Society
For Children with Disabilities



Participant Health Sheet

Please fill out a separate participant health sheet for each member of the family who is participating in Family Camp.



Name: _____

Disability (if applicable): _____

BC Care Card Number: _____ Gender: ____ Age: ____ Date of Birth: _____

Primary Care Physician Name: _____ Physician Phone Number: _____

GENERAL INFORMATION

Any health concerns/accidents that arise during a camp session must be brought to the immediate attention of the camp Health Care Team. While on-site all personal medications, including vitamin supplements, etc..., must be kept under lock and key in the Health Care Office. Families will be responsible for administering their own medications. If you are exposed to a communicable illness in the 2 weeks prior to the camp session, or have any significant changes in health, the Registrar must be informed. All information provided on this form will remain confidential with access provided only to our health care team as required. Please attach additional pages if necessary.

MEDICAL INFORMATION

Does this person have any of the following allergies?

Latex Allergies No Yes

Drug Allergies No Yes

Food Allergies No Yes

Environmental Allergies No Yes

Do they use a Puffer? No Yes

Please describe allergies and reactions: _____

Does this person have any anaphylactic reactions? No Yes To: _____

Do they carry an epi-pen? No Yes

Describe Reaction: _____

Does this person experience seizures? No Yes

Please state the type, frequency and duration of seizures: _____

Does this person wear a lifejacket while in/around water? No Yes

****It is BC Easter Seals Camps Policy that all campers with present concerns around seizure activity wear a Lifejacket while around/in water unless otherwise indicated by a Medical Professional. If this is a concern, please get in touch with the Camp Registrar.****

List all immunizations and the date given. Attach an additional sheet if necessary. (Not required for Campers as we have this info on file from previous registrations. Please just add any new immunizations)

Immunization

Year Given

Has this person ever had/been exposed to a serious/communicable illness that may impact the others at camp? No Yes

If yes, please specify (i.e. Hepatitis, HIV, TB, bronchitis, lice etc.): _____

MEDICATIONS (please attach a separate sheet if necessary)

Is this person currently taking any prescription medications? No Yes

If yes, please specify: _____

Is this person currently taking any other medications on a regular or occasional basis? No Yes

If yes, please specify: _____



The British Columbia Lions Society
For Children with Disabilities

Camper Information Sheet

Please fill out the Camper Information Sheet
for each Easter Seals Camper
(and siblings if applicable)



BEHAVIOUR SUPPORT

The following information will help our volunteers best provide assistance for your camper. Please communicate any changes or additions to this information with the camp volunteers who are working with your family.

Does your camper interact well with: Younger children Peers Older children Adults

Please indicate any behaviours that apply to your camper:

- Inappropriate language
- Self-abusive
- Physical aggression
- Attention Seeking
- Non-compliance
- Running away
- Wandering
- Sexual aggression
- Other: _____

Please explain any checked behaviours, their causes, frequency, and support techniques used (e.g. behavioural transitions, escalation signals, redirection cues): _____

Is your camper on a behaviour support program at home or school? No Yes (if yes, please attach a copy)

Please provide any additional information that will help our volunteers in ensuring your camper has a great weekend at camp: _____

COMMUNICATION

Does your camper speak clearly? No Yes Non-verbal

Does your camper have any communication tools or devices they will bring to camp? No Yes

Please specify: _____

If your camper is non-verbal, or has limited verbal communication, how do they make their needs known? _____

MOBILITY

Does your camper walk? No Yes Do they require assistance? No Yes

Does your camper use a wheelchair? No Yes Please specify: Manual Power Both

Can your camper operate their wheelchair independently? No Yes

Does your camper require transferring help to/from: Wheelchair Bed Toilet Bath/shower

Please specify the type of transfer used: _____

Please list other equipment your camper uses (e.g. walker, braces, crutches. AFO's etc.): _____



Consent, Liability and Waiver for Children



The Family Camp Application Form cannot be processed if the Liability Release is incomplete or altered in any way. Please print legibly. Please complete one Consent, Liability and Waiver for Children for each participant under the age of 19.

I, as the parent or legal guardian of _____ (Child's Name), and in consideration of the recreational, educational and health care services provided by the British Columbia Lions Society for Children with Disabilities (hereafter referred to as the 'BC Lions Society') agree as follows:

1. I hereby release and discharge the BC Lions Society, Easter Seals British Columbia, the Custom Service Transit Society, all other entities related to the BC Lions Society and any other respective agents and employees from all manner of action, causes of action, claims or demands I may have, arising from or related to the child's/my attendance at camp and/or activities held away from camp. I do however wish my child to attend a BC Easter Seals Camp, notwithstanding such potential risk.
2. I agree to indemnify the BC Lions Society, its services, agents or employees, from any claims or demands made against the BC Lions Society in respect to any loss or damage which they may suffer or become legally obligated to pay as a result of, or arising from, the child's attendance at camp.
3. I consent to the administration of the medical treatments on behalf of the child as is determined to be necessary by the BC Lions Society, its servants, agents or employees, in their sole discretion, for her/his health at the camp.
4. I certify that all information provided in this registration form is true and to the best of my knowledge at the time of completing this and for all subsequent camp administrated forms.
5. Please note that your child will ONLY be released on departure day to the individuals listed on this form (primary contact, authorized pick up list). The BC Lions Society must be notified IN WRITING of any changes of the list. Identification is REQUIRED for pick-up.
6. I have reviewed the expectations and policies as outlined throughout this application and I understand that should my child breach any of the expected behaviours, they could be asked to leave the camping program immediately. If this occurs, I will be responsible for arranging for my child's transportation from camp and the associated costs.
7. I agree that I am financially responsible in the case of illness, injury, accident, emergency or property damage resulting from the child's participation in Easter Seals Camping programs and that the BC Lions Society may claim over against me for any claim which the participant or a third party may make against the BC Lions Society and agree to indemnify and save harmless the BC Lions Society for any expenses reasonably incurred in consequence of the above.

-INFORMATION AND PHOTO WAIVER-

The BC Lions Society reserves the right to take, use and maintain as the property of the Society camper photographs and information for our promotional materials (print and electronic versions) and to thank donors for their support. Consent for such use is implied unless the Society is otherwise instructed. Please check the box below if you DO NOT wish that your child's/ward's photo and/or information be used by the Society for the above stated purposes:

I acknowledge that, to the best of my knowledge, the information on the application form is correct. I agree to inform the BC Lions Society of any changes in my child's medical condition prior to the start of camp. To meet the needs of our campers and have the ability to care for them we must collect personal information about them and distribute this information to people who will care for your child. All the information gathered is stored in a confidential manner. The BC Lions Society is in compliance with the Personal Information Protection Act of BC and the Personal Information Protection and Electronic Documents Act (PIPEDA). We may periodically contact you about Society programs, services, events fundraising or volunteering opportunities. To be removed from this list, please contact us at: (604) 873-1865 or 1-800-818-4483 or email: info@lionsbc.ca

I understand that this is an application for camp and does not guarantee confirmation. Notification of confirmation will be sent by mail at a later date once all portions of the application have been confirmed as successfully completed.

I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT, I AM WAIVING CERTAIN RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS, AND ASSIGNS MAY HAVE AGAINST THE RELEASES.

Signature of Parent/Guardian

Name of Parent/Guardian - Please Print

Date



Consent, Liability and Waiver for Adults



The Family Camp Application Form cannot be processed if the Liability Release is incomplete or altered in any way.

Please print legibly. Please complete one Adult Liability Form for each adult attending Camp

I, as the family member of _____ (Campers Name), and in consideration of the recreational, educational and health care services provided by the British Columbia Lions Society for Children with Disabilities (hereafter referred to as the 'BC Lions Society') agree as follows:

1. I hereby release and discharge the BC Lions Society, Easter Seals British Columbia, the Custom Service Transit Society and any other respective agents and employees from all manner of action, causes of action, claims or demands I may have, arising from or related to my attendance at camp and/or activities held away from camp. I do however wish to attend a BC Easter Seals Camp, notwithstanding such potential risk.
2. I agree to indemnify the BC Lions Society, its services, agents or employees, from any claims or demands made against the BC Lions Society in respect to any loss or damage which they may suffer or become legally obligated to pay as a result of, or arising from, my attendance at camp.
3. I consent to the administration of my medical treatments as is determined to be necessary by the BC Lions Society, its servants, agents or employees, in their sole discretion, for my health at the camp.
4. I certify that all information provided in this registration form is true and to the best of my knowledge at the time of completing this and for all subsequent camp administrated forms.
5. Please note that the child you accompany will ONLY be released on departure day to the individuals listed on the camper application form (primary contact, authorized pick up list). The BC Lions Society must be notified IN WRITING of any changes of the list. Identification is REQUIRED for pick-up.
6. I have reviewed the expectations and policies as outlined throughout this application and I understand that should I breach any of the expected behaviours, myself and the camper attending with me could be asked to leave the camping program immediately. If this occurs, I will be responsible for arranging for my and my camper's transportation from camp and the associated costs.
7. I agree that I am financially responsible in the case of illness, injury, accident, emergency or property damage resulting from my participation in Easter Seals Camping programs and that the BC Lions Society may claim over against me for any claim which the participant or a third party may make against the BC Lions Society and agree to indemnify and save harmless the BC Lions Society for any expenses reasonably incurred in consequence of the above.

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I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT, I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS, AND ASSIGNS MAY HAVE AGAINST THE RELEASES.

Signature

Name - Please Print

Date



BC Easter Seals Camps

Giving Children Abilities



PAYMENT INFORMATION

Payment information must be included for the application to be assessed. Payment will NOT be processed until the acceptance to family camp is confirmed. The fee of the Family Camp is \$ 75/participant

Number of participants attending camp _____ x \$ 75 = _____

ES Camper Name: _____

Payment Method:

Cheque (Please make cheques payable to "BC Lions Society")

Visa Mastercard American Express

Card Number: _____

Expiration Date: _____

Name on Card: _____

Signature: _____



WE NEED YOUR HELP



The Family Camp Application Form will NOT be processed without this page being completed and returned

The cost of family camp is significantly higher than the \$ 75/participant charged to the family. BC Easter Seals Camps do not receive any government funding. All programs are funded through generous donations from individuals, service clubs, Lions, Lioness, companies, foundations and events. Each year there is a need for donations so that we can have as many children as possible experience camp.

We would like to ask you, the parent/guardian, to make a contribution to help with this year's camp costs. Your donation will be receipted with a charitable tax receipt.

If you are able to help, please accept our gratitude. If you are unable to help please be assured that your family's acceptance is not contingent upon us receiving a donation.

INFORMATION - For tax receipt purposes, please print all information

Camper Name: _____

Parent/Guardian/Donor Name (must match name on Cheque or Credit Card): Mr. Mrs. Ms. Dr. Miss (Circle One)

Address: _____ Postal Code: _____

City: _____ Province: _____ Hm Ph#: _____

Email: _____ Cell Ph#: _____

Option #1 - Yes, I am able to help offset the costs of the BC Easter Seals camping program.

Please accept my donation of:

\$ 100 \$ 200 \$ 500 \$ 1,000 \$ 2,000 Other: \$ _____

I am enclosing: cheque, money order, or please charge my credit card:
(cheques can be made payable to "BC Lions Society")

Visa Mastercard American Express

Card #: _____ Expiry Date: ____/____

Name on Card: _____ Signature: _____

Option #2- Yes, however I prefer to be a monthly donor (see other side)
 I am already a monthly donor

Option #3- No, I am unable to make a donation at this time

IF YOU CHECK OPTION #3, YOU MUST STILL FILL-OUT PERSONAL INFORMATION ABOVE

Your privacy is important to us. From time to time the Society may contact you with information or requests pertaining to our camps or services. Should you have any questions regarding our privacy policy or wish to be excluded, please contact us at 604-873-1865 or 1-800-818-4483 or info@lionsbc.ca.



MONTHLY DONOR



Option # 2- YES, I want to become a "Partner in Caring" Monthly Donor:

For just \$0.33/day - \$10/month, You can provide Arts & Crafts supplies for a child at camp

For just \$1.37/day - \$40/month, You can provide climbing walls, low ropes courses & giant swings to a child at camp.

For just \$2.74/day - \$80/month, You can provide a great overnight camping experience for a child at camp.

For just \$6.81/day - \$200/month, You can provide a 7-day camping session for a child to go to camp

Please check your monthly donation amount

\$10 (.33¢/day) \$40 (\$1.32/day) \$80 (\$2.63/day) \$200 (\$6.81/day) Other \$ _____

Beginning on the 1st or 15th day starting in _____, 2012

Month

Please debit my bank account (attach void cheque and sign below)

Please charge my credit card (complete details and sign below)

VISA MasterCard American Express

Card # _____ Expiry Date: _____

Name on Card: _____

Signature: _____ Date: _____

Email: _____

Our Guarantee:

You may change or cancel your donation at any time by calling (604) 873-1865 or 1-800-818-4483 or email: info@lionsbc.ca. Please note that you will receive one charitable tax receipt for all of your preauthorized contributions each calendar year.

Your generous donation ensures that campers will have
FUN at CAMP!!
Thank-you so much.