

# Registration Form For New Participants

*Kinderkids M W F*

*Time For Tots TU TH*

*Kinder Prep. TU TH*

**(Circle all days that the child is being registered for)**

<p><b>Child's Name</b> _____</p> <p><b>Phone Number:</b> _____</p> <p><b>Birth date:</b> _____ <b>Sex:</b> M F (month/day/year)</p> <p><b>Address:</b> _____</p> <p><b>City:</b> _____ <b>Postal Code:</b> _____</p> <p><b>Allergies/medication:</b> _____</p>
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<p><b>Mother/Guardian's Name:</b> _____</p> <p><b>Bus. Phone #:</b> _____ <b>Cell #:</b> _____</p> <p><b>Email:</b> _____</p> <p><b>Father/Guardian's Name:</b> _____</p> <p><b>Bus. Phone #:</b> _____ <b>Cell #:</b> _____</p> <p><b>Email #:</b> _____</p> <p><b>Emergency Contact:</b> _____</p> <p><b>Phone #:</b> _____ <b>Cell #:</b> _____</p> <p><b>Relationship to Child:</b> _____</p>
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Who can your child be released to:

Name	Home number	Cell number
1) _____		
2) _____		
3) _____		

\* Children will not be released to unauthorized individuals until written or verbal consent is obtained directly from the parents

Authorized individuals are required to **show photo identification** when picking up their children. Please inform any other authorized individuals of the procedure.

**Please update your child's records to ensure this information is accurate.**

**Walk Consent Form:**

The following form is to give your permission to the Victoria Park Community Centre staff to take your child on short excursions outside the VPCC Building. (i.e. neighbourhood walks).

I, \_\_\_\_\_ give the staff at VPCC my permission to take  
\_\_\_\_\_ on short excursions outside of the building.  
(child's name)

Parent/Guardian Signature: \_\_\_\_\_

**Photo Consent Form:**

The following form is to give the Victoria Park Community Centre staff as well as the local press permission to take pictures of your child during program hours.

By signing below I am giving permission for my child to be photographed during program hours.

Parent/Guardian Signature: \_\_\_\_\_

I hereby release the Corporation of the Town of Ingersoll from all claims for damages arising from any accident or injury which is caused by or arises from participation of the applicant hereon during any program or in any location where a program is held.

Signature of participant or parent/guardian if under 18: \_\_\_\_\_