



Welcome to

# CAMP POWER!



## CAMPER REGISTRATION FORM

Please complete and return this form to your son/daughter's school no later than **Friday, May 30, 2014**. Spaces are limited.

**Confirmation will be given by June 13, 2014.**

Camp POWER is part of a Province Wide Research Project.

Please see the attached letter for more information regarding the research component.

**Site Choice:**

- Prince of Wales
- Hillcrest

### PERSONAL INFORMATION

Last Name		First Name (s)		Middle Name	<input type="checkbox"/> Male <input type="checkbox"/> Female
Current School Name <input type="checkbox"/> Prince of Wales <input type="checkbox"/> Memorial City <input type="checkbox"/> Queen Mary		Teacher's Name and Room Number			Current Grade <input type="checkbox"/> Grade 1 <input type="checkbox"/> Grade 2
Date of Birth: (yy/mm/dd)		Telephone (Home) (   )		Parent/Guardian (Work/Business) (   )	
Apt#	Address		City/Town		Postal Code
Ontario Health Card #		Family Physician		Physician's Phone #	
Emergency Contact Person #1		Emergency Contact Address		Emergency Contact Telephone #	
Emergency Contact Person #2		Emergency Contact Address		Emergency Contact Telephone #	
Medical Concerns? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:					
Dietary Restrictions? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain:					
Custody: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Both Parents <input type="checkbox"/> Guardian(s)					
(Please name)					
Name of person(s) authorized to pick up child <u>other than parents</u> :					
(1) _____		Phone: _____			
(2) _____		Phone: _____			

**PLEASE COMPLETE BOTH SIDES OF THIS REGISTRATION FORM**



## First Nation, Métis, and Inuit (FNMI) Students

Students attending Camp POWER have the option of signing up for a program that aims to increase literacy and numeracy rates while at the same time celebrate the diverse histories, cultures, and perspectives of FNMI students and their families.

I would like to sign my child up to be a part of the FNMI program.

- YES  
 NO

Please Check!

### CAMP POWER PROGRAM INFORMATION

**ATTENDANCE:** It is the parent/guardian's responsibility to inform the teacher each day of any absences.

**TRANSPORTATION: NO** transportation is provided for Camp POWER. Parents/guardians are responsible for the timely arrival and departure of their child(ren) each day.

**BEHAVIOUR:** Students enrolled in Camp POWER must make every effort to complete their work in class and participate in all activities. Students must be respectful of their teachers, fellow classmates and all other support staff on site. Parents will be contacted by the teacher and/or Principal should there be any concerns. Students may be asked to leave the program if there are concerns.

**SUPPORT:** There are no Special Education Resource Teachers or Educational Assistants available to assist with program modifications/accommodations. Every effort will be made by the classroom teacher to support and enhance the learning of each student. Identified students with Individual Education Plans are welcome to attend with the above understanding.

### CONSENT FORM

1. **CONSENT TO PHOTOGRAPH:** In accordance with the Municipal Freedom of Information and Protection of Privacy Act, I consent to have my child's photograph taken at Camp POWER and used in future promotional and/or informational brochures; posters; newsletters; media information; yearbooks; web pages; videos and advertisements for the Hamilton-Wentworth District School Board.

- YES  
 NO

Please Check!

2. **INTERNET USAGE:** As parent/guardian of the above student I grant permission for my child to use Internet services provided by the Hamilton-Wentworth District School Board as part of the Camp POWER program.

- YES  
 NO

Please Check!

3. **CONSENT TO INTERVIEW:** I grant permission for my child to be interviewed by one of the Summer Program lead researchers, from The University of Waterloo and McMaster University, for the purpose of gaining information on how students see themselves as learners.

- YES  
 NO

Please Check!

**If Yes,**

- I would like to be present with my child during the interview.  
 I do not need to be present during the interview.

Parent/Guardian Name (Please PRINT)

Date

Parent/Guardian Signature

**PLEASE COMPLETE BOTH SIDES OF THIS REGISTRATION FORM**