

**PIONEER KIDS CLUB
INFORMATION FORM:**

We must receive your FORMS and FEE for your child to be considered as registered. A separate form should be filled out for each child being registered. Please ensure you have COMPLETELY filled out the application below, AS WELL AS the waiver in order to secure your reservation. **The dates for the Pioneer Kids Club are January 30, February 6, 13, 20, 27 and March 6, 2009**

Child Information:

Name: _____

Age on first day of program: _____ yrs.

Male Female

Attended Black Creek Adventure Day

Camp in 200_

Address: _____

City: _____

Postal Code: _____

Home Telephone: _____

Parent or Guardian:

Daytime Tel: _____

Parent or Guardian:

Daytime Tel: _____

Person dropping off:

Person picking up:

Emergency Contact (non-parent):

Relationship: _____

Tel: _____

Medical Information:

Family Doctor: _____

Tel: _____

Ontario Health Card No:

Special Needs:

Activity Restrictions:

Medical Conditions:

Method of payment:

Amount paid: _____

Cash (in person only) VISA

Cheque made payable to M/C

Toronto and Region
Conservation

Card #: _____

Expiry Date: _____

Signature: _____

CANCELLATION POLICY: *Written notification of a cancellation must be received. Cancellations made at least four weeks before the start of the session will receive a refund of 75 per cent of the fees. Cancellations made within the four-week period will not receive a refund. There is no refund for days missed from the Pioneer Kids Club.*

How did you hear about the Black Creek Pioneer Village Pioneer Kids Club? _____

Please fill out all forms completely and send to

*Customer Service, TRCA
Re: Pioneer Kids Club
5 Shoreham Drive
Downsview, Ontario
M3N 1S4*

TORONTO AND REGION CONSERVATION

WAIVER OF CLAIMS and INDEMNITY

Black Creek Pioneer Village, Pioneer Kids Club

January-March 2010

In consideration of the acceptance of my child's application and permission to participate in the Black Creek Pioneer Village Pioneer Kids Club, known hereafter as BCPV Pioneer Kids Club, I for myself, my heirs, executors, administrators, successors and assigns **herby release, waive and forever discharge** Toronto and Region Conservation and all their employees, agents, servants and contractors and all other associations, sanctioning bodies and sponsoring companies, and elected and appointed officials, successors and assigns, of and from all claims, demands, damages, costs, expenses, actions and causes of action, whether in law or in equity, in respect of death, injury, loss or damage to my person or property however caused, arising or to arise by reason of my child's participation in the said BCPV Pioneer Kids Club, whether as spectator, participant, or otherwise; whether prior to, during or subsequent to his/her participation in the BCPV Pioneer Kids Club and notwithstanding that the same may have been contributed to or occasioned by the negligence of the aforesaid.

I further hereby undertake to hold and save harmless, and agree to indemnify all of the aforesaid from and against any and all liability incurred by any or all of them arising as a result of, or in any way connected with my child's participation in the said BCPV Pioneer Kids Club.

I acknowledge and have read, understood and agree to the above waiver, release and indemnity. I warrant that my child is physically fit to participate in the BCPV Pioneer Kids Club, and I hereby understand that he/she will follow the rules and regulations as set out by the organizers of the BCPV Pioneer Kids Club, and that by not adhering to the rules and regulations, he/she may not only endanger himself/herself, but permission may or will be revoked and he/she will be asked to leave the premises.

IN WITNESS WHEREOF, this waiver and indemnity has been duly executed at _____, 20__.
(city) on this _____ day of _____ (day of month) (month) (year)

The undersigned jointly and severally agree to this waiver and indemnity.

_____	_____	
Date	Print Name of Participant	
_____	_____	_____
Date	Print Name of Parent or Guardian	Signature of Parent or Guardian
_____	_____	_____
Date	Print Name of Witness	Signature of Witness

Please fill out all forms completely and send to

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Re: Pioneer Kids Club
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