

Section D – Consent & Signature

- I hereby register my child(ren) to attend Summer Plus.
- I consent to receive email communication from St. Bonaventure's College and understand I can unsubscribe anytime by contacting the program coordinator or by clicking the unsubscribe button in ConstantContact emails.
- I give St. Bonaventure's College permission to use my child's photo. I understand that these images may be used in print publications, advertisements, and online for St. Bonaventure's College. My child's full name will not accompany their photo.
- I am familiar with all school policies and will respect and adhere to them.
- I agree to pay registration in accordance with the payment option selected.
- I understand this registration will only be considered complete if all required information has been completed and the non-refundable registration for each child has been included.
- I understand I will be charged a \$25 fee for any NSF payments
- I understand that if I choose to withdraw my child(ren) after the February payment, all payments are non-refundable.

Date: _____

Signature: _____



**Field Trip Permission Form/
Emergency Medical Treatment Authorization**

We, _____ hereby authorize the counsellor in charge of _____ (child's name) to secure emergency medical advice and services as may be deemed necessary for the health and safety of our daughter/son (the "child") while participating in activities both on and off campus for Summer Plus 2018. We hereby authorize the counsellor in charge to act generally on behalf of the child and as fully in/all aspects as we would reasonably do AND we hereby agree to accept financial responsibility for any excess of the benefits allowed by the Provincial Health Plan and undertake to save harmless and indemnify St. Bonaventure's College from all claims, demands actions or suits which may be brought against St. Bonaventure's College in respect to any matters or things hereinbefore set forth.

Dated in the City of St. John's, this _____ day of _____, 2019.

Signature of Parent/Guardian

Signature of Parent/Guardian

Parent/Guardian's Name, Address &
Telephone/Cell #'s/Email:

Parent/Guardian's Name, Address &
Telephone/Cell #'s/Email:

Other Medical Plans with Numbers:

Other Medical Plans with Numbers:



DISCIPLINE AND BEHAVIOUR

St. Bonaventure's College promotes an atmosphere of safety and respect. Participants will abide by all regulations concerning discipline and behaviour while participating in the camp.

PARTICIPANTS MUST BRING DAILY

- Sneakers (non-marking soles)
- Change of clothing
- Packed lunch (not microwavable)
- 2 nutritious snacks
- All weather clothing (i.e. long pants, sunhat, rain gear, etc)
- Sunscreen
- It is recommended that parents/guardians write their child's name on all items to help identify the owner should items be misplaced. SBC is not responsible for lost items.
- Valuables such as electronic devices, cellphones, toys should be left at home. Lost and broken items cause unnecessary upset.