2018 UNB Saint John Camps Registration Form

Participant & Camp Information – Please PRINT – Please check camp(s) applying for

Participant Name:	·					Gender:	F/M
Birthdate:(yy/mm/dd)			Grade in Sch	ool:		Age:	
T-shirt Size (circle one)	Youth S	Youth M	Youth L	Adult S	Adult M	Adult L	Adult XL
Medicare # and Expiry Date:							
Home Address in Full:							
Email Address (print clearly):							

Camp	Details	Fee*	Check
Volleyball 1 (Middle School)	July 3-6 9:00am-4:00pm	\$200	
Field Hockey Workshop (Ages 13-18)	July 9 & 10 9:00am-4:30pm	\$150+tx	
Maker Tech- <mark>Sport</mark> Camp (Ages 8-14)	July 16-19 9:00am-4:00pm	\$175	
Canada Games Kids Camp (Ages 5-12)	July 3 & 5/July 30 & Aug 2/ 8:30am-4:30pm Register at: <u>https://www.aquatics.nb.ca/aqua</u>	tics/summer-camp	os/
Volleyball 2 (High School)	August 7 – August 10 9:00am-4:00pm	\$200+tx	
Multi-Sport Camp (Ages 8-1 <mark>4)</mark>	August 13- August 17 9:00am-4:00pm	\$200	
Basketball Camp (Ages 8-13)	August 20- August 24 9:00am-4:00pm	\$175	
Badminton Camp (Ages 8-17)	August 27 – August 30 8:30am-12:30pm	\$150	

EST. 1785

To pay in person via credit Card fill in below.

Account #: 2-340027-46010-61-22	Subtotal	Total
Plus 15% HST for Field Hockey, Volleyball 2 (#1-000000-	\$	\$
21505-11-00)	Saint	
	Janti	
1		
<u>Do not fill out CC info if you</u>	<u>are paying online</u> . 🔻	

Name of Cardholder	Credit Card #	Expiry Date

Accepted Methods of Payment: Cheques, Credit Card (online payment through Event Brite) or exact Cash amount. Please make payable to: **UNB Saint John Athletics**

How to Register:

Online: Visit unb.ca/saintjohn/athletics/community/camps-clinics.html under "Register Now"

By Mail: send registration form and payment to UNB Saint John Athletics Dept. P.O Box 5050 Saint John, NB E2L 4L5

In Person: Visit the Athletics Dept. Stephanie Guimond Room 105.

<u>Refund Policy:</u> The UNB Saint John refund policy includes a \$45 administration charge for cancelling a registration prior to the start of camp. This \$45 charge will only be waived if appropriate medical documentation is provided upon cancellation. Once the camp starts refunds will only be granted if a certified medical excuse is provided. UNB Saint John has the right to cancel any camps due to lack of participants or other operational reasons, in the event of a camp cancelation a full refund will be issued.

UNB Saint John Sport Camps Parental Consent

PHOTO CONSENT:

I hereby consent to allow the UNB Saint John Athletics Department to take photos of the above noted participant for promotional purposes of the UNB brand, on the UNB website and UNB social media platforms.

Parent/Guardian	Signature
-----------------	-----------

Date

INFORMED CONSENT

BY SIGNING BELOW you are indicating that you have read and **agree to all of the policies stated**. In consideration of UNB accepting the above minor as a participant in our program and allowing him/her to enjoy the facilities at UNB Saint John Summer Sport Camp Program, the undersigned parent or guardian on behalf of him/herself and on behalf of the minor applicant, does waive and release each and every right or claim we and each of us have or may have against UNB, its agents, employees, or representatives for all and any injuries, accidents, or mishaps occasioned by or to above named minor while participating in the activities of or in the care of UNB. Experience has shown that during participation in recreational activities, there are times when illness or accident may occur and immediate medical or surgical attention is necessary. This is my permission for the UNB Saint John Summer Sport Camp Program leader or designate, to make arrangements for qualified medical or surgical attention for my child/ward in the event of an emergency without necessity of my prior approval. I understand that I will be notified by the quickest means possible if this authority is exercised.

Parent/Guardian Signature	Date	
please provide details:	nental or emotional conditions that we should be awa	<u>ا ا</u>
Participant's Method of Travel:	Saint .	loh n

GUARDIAN INFORMATION			
Parent/Guardian 1:			
Relationship to Participant:			
Home Phone:	Work Phone:		
Email:			
Parent/Guardian 2:			
Relationship to Participant:			
Home Phone:	Work Phone:		
Email:			

UNIVERSITY OF NEW BRUNSWICK SAINT JOHN Release of Liability, Waiver of Claims and Assumption of Risks

ATTENTION: By signing this document you hereby waive legal rights which includes the right to sue.

Participant Full Name:			
Date of Birth:	Phone Num		
Full Address:			
Street Name	City	Province	Postal Code
Emergency Contact Information Name: Phone Number: () Relationship:	collected is for re	d to ensuring the ndividuals and participants. Ir gistration purposes and will o e to Sport & Recreation for ad	nly

ASSUMPTION OF RISKS

I, (Guardian Name) ______, on behalf of, ______am aware that participation in Sport and Recreation Activities has risks, dangers and hazards including but not limited to:

Personal injury or illness, including, but not limited to, death, due to; slippery or uneven surfaces; athletic injuries including overexertion, sprains, muscle pulls or tears, or injury resulting from the use, misuse, non-use or failure of any equipment.

I fully accept and assume all such risks, dangers and hazards and the possibility of personal injury, death, property damage or loss, resulting in participation.

RELEASE OF LIABILITY, WAIVER OF CLAIMS

In consideration of UNIVERSITY OF NEW BRUNSWICK allowing my participation in Sport and Recreation Activities, I agree to:

- 1. <u>Waive any and all claims</u> that I have or may have in the future against the Governors of the University of New Brunswick, and their members, officers, employees, students, agents, volunteers and independent contractors (all of whom are collectively referred to as "the Releasees");
- To release the releases from any and all liability for any loss, damage, injury or expense that I may suffer, or that my next of kin may suffer as a result of my participation in the Sport and Recreation Activities due to any cause whatsoever including negligence on the part of the releasees.
 Initial here to agree: ______
- 3. <u>To hold harmless and indemnify the releasees</u> from any and all liability for any damage to the property of, or personal injury to, any third party, resulting from my participation in the Sport and Recreation Activities and
- 4. This agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns and representatives in the event of my death or incapacity.

In entering into this agreement, I am not relying upon any oral or written representations or statements made by the Releasees other than what is in this agreement.

I do hereby confirm and acknowledge that this waiver is voluntarily signed by me (on behalf of the participant) having ample opportunity to read the same with full knowledge and understanding of the contents. 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 releasees.

Signed this _____day of _____, 201___

Guardian Name, Print Clearly

Guardian Signature

UNB Saint John Summer Camps Participant Information

For the Camp

- Participants are required to bring their own lunch, snacks and water bottles.
- Participants are to be dropped off and picked up by parents or guardians. If your child is travelling with someone else please let us know.
- Drop off is 15 minutes-30 minutes before camp begins, pick up should be no later than 15 minutes after camps are finished.
- Please pack sneakers, sunscreen, hats and appropriate athletic wear, outdoor and indoor wear for the camp.
- Please indicate on registration form if the participant has any allergies, special needs or any important information that the coordinator/facilitators should be aware of.

Payments/Registration

- Registration forms and waivers are to be given to Stephanie Guimond, Athletics Dept. Room 105 or mailbox across from office.
- Registration can be done in person or emailed, they MUST BE SIGNED by the parent or guardian. (If you are emailing the registration form and waiver, you can digitally sign them or print it off, sign it, then scan it to Stephanie.Guimond@unb.ca)
- Online payment option through Eventbrite (Link is available on camps and clinics page.)
- Payments are also accepted in person at the Registrar's Office in Oland Hall.
 Acceptable methods of payment are cash, debit or credit card. Business Hours are: 9am-4pm.
 - Registration and Payment MUST BE COMPLETED BY DEADLINE.

If you have any questions please contact Stephanie.Guimond@unb.ca