

RUNDLE HANG-OUT

Youth Application Form 2018 - 2019





Student's Name	Dat	e of Birth	Gender	Grade
Address	City	Province	Postal Code	Cell Phone
Parent/Guardian Name	Home Phone	? C	'ell Phone	Work Phone
Parent/Guardian Email	Address, if n	Address, if not the same as student's		
Parent/Guardian Name	Home Phone	e C	'ell Phone	Work Phone
Parent/Guardian Email	Address, if n	Address, if not the same as student's		
	EMERGENCY	CONTACTS		
Name	Relationship		Phone	
Name	Relationship		Phone	
	MEDICAL INF			
Does your child have any special Rundle Hang-Out program shoul			oncerns or limitatic	ns that our staff at
If yes, please explain				
Please note that our Rundle Han need of medication during our pr				
	CUSTODY INF	ORMATION		
Are there any custody issues tha	at our Rundle Hang-Out staff	should be awar	e of? Yes N	lo

CHECK OUT				
□ My child has permission to walk home from the Rundle Hang-Out program □ I pick up my child □ If I am unable to pick up my child the following person(s) is (are) authorized to do so:				
Name	Relationship	Phone		
Name	Relationship	Phone		
Please note, if anyone is prohibited from program. Please specify the individuals h		ing and from our Rundle Hang-Out		
Name	Relationship	-		
Name	Relationship	-		
WA	VER AND RELEASE OF LIABIL	ITY		
In consideration of City Life Centre, and have permitted me to attend and partici may have accrue in the future against them harmless from and against all liab expenses, claims, demands, damages, a can, shall, or may have resulting from or the parent/caregiver/guardian accept th attendance of this program. Additionally (please check each box) I understand that my child is respons in removal from the program.	pate in this program, I hereby waive all in above mentioned parties. I hereby reliable above mentioned parties. I hereby reliable for any and all action, damages, cand judgements which i and my entire fare arising in connection with my involvements waiver and release of liable terms of this waiver and release of liable.	rights which I may now have or which ease and discharge them, holding uses of action, suits, costs, losses, mily ever had, now have, or hereafter nent with these organizations. I/We as pility as a condition to my child's		
\square I give permission for photos or video c newletters, and videos.	f my child's participation to be used for	promitional purposes, websites,		
\square I have read and signed the separate w participate in off campus activities durin		s forms giving my child permission to		
Parent/Guardian Name		Date		
Parent/Guardian Signature				











RUNDLE HANG-OUT

OFF CAMPUS ACTIVITY CONSENT FORM IN CONJUNCTION
WITH SD33 FORM 623.1A

2018 - 2019

After school program at AD Rundle in partnership with Mainstreet Church. The Rundle Hang-Out program is an outflow program of Afternoon Adventures.



PLEASE READ CAREFULLY

Dear Parent(s)/Guardian(s),

We are planning a variety of Rundle Hang-Out activities for 2018 – 2019, of which some may take us off campus and will require your permission prior to your child's participation.

As a reminder of upcoming off-campus events, your child will receive a letter a week prior to the date, informing you about the place and kind of off-campus activities. There is NO CHARGE for off-campus activities to the students and if needed, transportation will be provided.

Since the safety of your child is our primary concern we're requesting that you complete this, one time, consent form (form 623.1A) required by the SD33 policies. These completed and signed forms allow us to include your child in any of the off-campus activities supervised by the Rundle Hang-Out Staff, leaders and volunteers.

Sincerely,

Jannette Loosdrecht Afternoon Adventures Director jannette@citylifechurch.ca

Lindsey Doerksen Rundle Hang-Out Program Team Leader lindsey@mainstreetchurch.ca

OFF CAMPUS ACTIVITY CONSENT FORM

By signing below I agree with the following:

I hereby consent to the participation of my child in the Rundle Hang-Out Program off-campus activities. I understand that my child will be transported on the bus to and from the school if necessary or may walk to their place of activity. I will not hold City Life Centre, the partnering church, or any Rundle Hang-Out leaders or volunteers accountable or responsible in the unlikely event that my child is injured while participating during these activities.

I have completed the Student Field Experience and Special Acivities Parental Consent Form (Form 623.1A) and understand that is part of the School Disctrict 33 policies.

Date:	Student's Name:
Parent/Guardian's Name:	
Parent/Guardian's Signature:	



