

2023 CHEQUE & SPONSORSHIP REGISTRATION

*****PLEASE PRINT CLEARLY*****

Camp Number (please circle one): **1** **2** **3** **4** **5** **6** **7** **8** **9** **10** **11** **12**

Camper First/Last Name: _____

Email: _____

Address: _____

City: _____

Province (State): _____ Postal (Zip) Code: _____

Phone Number: _____ Grade in September: _____

Birth Date (dd/mm/year) ___/___/___ Gender: MALE FEMALE

What is your spoken language at home?: _____

Church Affiliation (if applicable): _____

Bunk Mate Request (only one request): _____

Personal Health Number: _____

Doctor's Name: _____ Doctor's Phone #: _____

Are you a resident of Canada: YES. NO
If no, you must have medical insurance and send copies to the office with your registration form

Allergies (medication, seasonal & food): YES NO (if yes please specify)

Dietary Restrictions (wheat, dairy, vegetarian): YES NO (if yes please specify)

Any chronic health problems (ADD, Asthma, etc.): YES NO (if yes please specify)

Is bedwetting an issue: YES NO (if yes please specify)

Any reason the camper may require additional supervision: YES NO (if yes please specify)

Would you like to speak to our medical personnel OR head cook prior to camp: YES NO (if yes please specify)

Do you anticipate sending medications to camp? YES NO (if yes please specify)

** Please note, medication is not permitted in the cabin, but will be stored on our on-site medical centre. A doctor or Nurse is on site at all times and will administer any medication. Over the Counter remedies are available.*

Daybreak Point Bible Camp will follow all public health guidelines set by Vancouver Coastal Health and the Government of BC regarding health orders.

Parent/Guardian Full Name: _____

Parent/Guardian Phone #: _____ Parent/Guardian Email: _____

Parent/Guardian Secondary Phone #: _____ Parent/Guardian Work Phone: _____

Emergency Contact Full Name: _____

Emergency Contact Secondary Phone #: _____ Emergency Email: _____

Emergency Contact Cell Phone: _____ Emergency Contact Work Phone: _____

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EARLY DEPARTURE: Camper will not be released early from camp unless accompanied by the parent/guardian or the person named here: _____

Terms of Registration

1. I release Daybreak Point Bible Camp Society (the 'Society'), its employees, volunteers, representatives, directors and officers (collectively 'Daybreak') from all liability and waive against Daybreak all recourse, loss or damage, including any consequential damage or loss, claims, causes of action of any kind whatsoever that the registrant (the 'Camper'), the next of kin or family may suffer as a result of the participation in the activities carried out on and in the vicinity of the Society's property or while a Camper with the Society. This release and waiver includes but is not limited to all waterfront, ocean and land activities and the archery and pellet ranges. I voluntarily accept the legal risk on behalf of the Camper to participate at the camp run by the Society, and hereby expressly waive any right of legal action against the Society and Daybreak.
2. Daybreak Point Bible Camp reserves the right to refuse a camper registration for any reason.
3. The Camp Director reserves the right to dismiss any camper who constitutes a hazard to the safety and rights of others, or demonstrates that he/she has rejected the reasonable controls and supervision of the camp staff. No refund of camper fees will be available if a Camper is dismissed as a result of creating a hazard.
4. The parent or guardian is responsible for replacing or repairing any property damaged by a camper.
5. I authorize Daybreak's medical professionals to administer first aid and health care. This includes authorization to approve and obtain medical attention necessary for the Camper's best interests, welfare and good health including ordering injections, anesthesia or surgery. I understand that all reasonable attempts will be made to consult with myself prior to treatment where possible, except in the case of minor illness and/or first aid where deemed appropriate by Daybreak.
6. Out-trips to various locations on the island are a regular event at camp and directors ensure that the range and difficulty of out-trip is appropriate to the age of the Camper. If you have concerns about your child participating in out-trips please contact our office prior to camp beginning. Medical personnel accompany campers on all out-trips to provide medical attention when necessary. A registered nurse, OFA-3 attendant, and first-aid trained lifeguards are on-site and readily available in any medical emergency.
7. I consent for the Society to use photographic/videography images of my child on any camp promotional material (including brochures, official social media channels and website) used to promote the Daybreak Point Bible Camp Ministry.
8. I understand that upon completion of camp I am responsible to pick-up our Camper at the point of departure or make appropriate alternate arrangements.
9. Should the Camper need to be picked up early from camp due to prior arrangement or dismissal, the Camper will be released in accordance with the instructions made on this form or in writing prior to camp starting. Furthermore, Daybreak will provide transportation to Lions Bay Marina. It will be the responsibility of the parent or guardian to arrange transportation from this point.
10. Refunds of camp fees are not made for any campers departing early from camp for any reason, including health reasons, and any Camper departing due to COVID-19 infection.
11. I consent to my child leaving Daybreak Point Bible Camp property for day out-trips.
12. I will disclose all medical problems or concerns prior to camp, including any symptoms related to COVID-19. Failure to disclose medical problems or concerns at time of registration may result in dismissal and additional costs required for the transportation of any camper with symptoms related to COVID-19. Cancellations prior to the start of any respective camp will make you eligible for a full refund, as reasonably determined by Daybreak.

I have carefully read and agree to the waiver, terms and conditions of registration and understand all parts of the document. If any part of the document was unclear, I resolved these prior to acknowledging my consent. By signing the registration form above I understand that this is a complete release, waiver of claim and assumption of risk and is binding of my heirs, my administrators, personal representatives and myself.

Print Child's Name: _____

Print Parent/Guardian Name: _____ Parent/Guardian Signature: _____

CAMPER FEE Before May 1st \$545.00 + GST = \$572.25 | CAMPER FEE After May 1st \$570.00 + GST = \$598.50

Paying by (circle one): Cheque | Credit Card | E-transfer (arranged via the office)

CREDIT CARD NUMBER: _____

EXP. (mm/yy): ___/___ CVV: _____

BILLING NAME: _____

BILLING ADDRESS: _____

CHEQUE NUMBER: _____

Total amount paid: _____