

16-260 Regina Road. Woodbridge, Ontario. L4L 8P8. ☎ (905) 265-7458 | www.funontherunchildcare.com

MARCH BREAK CAMP - MICHAEL CRANNY P.S.

Place a check \square on the dates your child will be attending.

□ **Monday March 10, 2025** 7:00AM – 5:30PM

□ **Thursday March 13, 2025** 7:00AM – 5:30PM

PARENT NAME (PRINT)

□ **Tuesday March 11, 2025** 7:00AM – 5:30PM

Pizza lunch offered on

Monday & Friday!

□ Wednesday March 12, 2025 7:00AM – 5:30PM

□ Friday March 14, 2025 7:00AM – 5:30PM

Payment Amount: ______ Cash | E-Transfer | Subsidy | Pizza Payment Included | Camp Shirt Payment Included | Youth Camp Shirt Sizing | S | M | L | XL

DATE

CHILD'S INFORMATION

	Please complete the registration form	n in full – one per child		
First Name:	La	st Name:		
		Postal Code:		
Home Phone:	Date of Birth:	Age:		
Gender: Male Female	Weight (in pounds):	Height (in feet):		
	PARENT/GUARDIAN INFO	DRMATION		
Parent Name:		Parent Name:		
	lome Address: Home Address:			
Home Phone:		Home Phone:		
Cell Phone: Cell Phone:				
Email Address: Email Address:				
	MEDICAL INFORMA	TION		
	actic allergy or medical need? (Please Checked YES, please contact Head Office to receive	•		
Other:	Allergies:			
Hearing Difficulties:	Sight Difficulties:	Skin Condition:		
Is Special Attention Required? (D	Development, Behaviour, Diet, Rest, Speech,	etc.) NO YES		
If so, please describe:				
Is your child under any form of t	reatment/medication for an illness or an inju	ury?		
If so, would it interfere with thei	r participation in the March Break Camp pro	ogram?		
	FAMILY DOCTOR INFO	RMATION		
Name of Family Doctor:	Offi	ce Phone:		
Address:	Suite #:	City:		
	EMERGENCY CONT	TACT		
Full Name:	Home Phone:	Cell Phone:		
		CK UP		
1. Full Name:		t Number:		
2. Full Name:	Primary Contac			
received by Fun on the Run.	uired for the dates in which I have registered.	understand that I will not be able to cancel once my payment		
		l activities. I have read and understood this form and will notify th child to be taken to a hospital and treated by the on-duty physiciar		

PARENT SIGNATURE



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PIZZA NOVA ORDER FORM SUBMIT ONE ORDER FORM PER CHILD March Break Camp 2025



Child's Full Name: Grade (<i>Please Check ☑</i>): □ Kindergarten □ Schoo **Please note: All pizza slices come with cheese ONLY - NO substitutions.	Child's Full Name: Grade (Please Check ☑): ☐ Kindergarten ☐ School-Ag Please note: All pizza slices come with cheese ONLY — NO substitutions. Pizza slices are EXTRA-LARGE, meaning that (1) slice is equivalent to (2) slices in a party size pizza. The cost of each extra-large slice is \$5.25 — Cash or E-Transfer. Monday March 10, 2025 \$5.25 x slices = \$ Friday March 14, 2025 \$5.25 x slices = \$	SCHOOL LOCATION Place a check ☑ next to your child's school location.						
Please note: All pizza slices come with cheese ONLY – NO substitutions. Pizza slices are EXTRA-LARGE, meaning that (1) slice is equivalent to (2) slices in a party size piz The cost of each extra-large slice is \$5.25 – Cash or E-Transfer. Monday March 10, 2025 \$5.25 x slices = \$ Friday March 14, 2025 \$5.25 x slices = \$	Please note: All pizza slices come with cheese ONLY - NO substitutions. Pizza slices are EXTRA-LARGE, meaning that (1) slice is equivalent to (2) slices in a party size pizza. The cost of each extra-large slice is \$5.25 - Cash or E-Transfer. Monday March 10, 2025 \$5.25 x slices = \$ Friday March 14, 2025 \$5.25 x slices = \$ Total Payment: \$ Date Received: Payment Amount:	□ Johnny Lom	bardi P.S.	□ Michael Cranny	P.S. 🗆 Nellie	McClung P.S.	□ Pope Fra	ancis C.E.S.
The cost of each extra-large slice is \$5.25 - Cash or E-Transfer. Monday March 10, 2025 \$5.25 x slices = \$ Friday March 14, 2025 \$5.25 x slices = \$	The cost of each extra-large slice is \$5.25 - Cash or E-Transfer. Monday March 10, 2025 \$5.25 x slices = \$ Friday March 14, 2025 \$5.25 x slices = \$ FOR OFFICE USE ONLY: Date Received: Payment Amount:		Please no	ote: All pizza slices c	ome with chees	e ONLY – <u>NO st</u>	ubstitutions.	_
Monday March 10, 2025 \$5.25 x slices = \$ Friday March 14, 2025 \$5.25 x slices = \$	Monday March 10, 2025 \$5.25 x slices = \$ Friday March 14, 2025 \$5.25 x slices = \$ FOR OFFICE USE ONLY: Date Received: Payment Amount:	Pizza slice	s are <u>EXTRA</u>	- <u>LARGE</u> , meaning th	at (1) slice is eq	uivalent to (2)	slices in a pa	rty size pizza.
Friday March 14, 2025 \$5.25 x slices = \$	Friday March 14, 2025 \$5.25 x slices = \$ FOR OFFICE USE ONLY: Date Received: Payment Amount:	FREE	The co	st of each extra-larg	<mark>ce slice is \$5.25</mark>	- Cash or E-Tra	<mark>ınsfer.</mark>	
	FOR OFFICE USE ONLY: Date Received: Payment: \$	NUTRE	Monday	March 10, 2025	\$5.25 x	slices = \$ _		
FOR OFFICE USE ONLY:	Total Payment: \$ Payment Amount:		Friday IV	larch 14, 2025	\$5.25 x	slices = \$ _		
FOR OFFICE USE ONLY:	Total Payment: \$ Payment Amount:							
FOR OFFICE USE ONLY:	Total Payment: \$ Payment Amount:							
	Total Payment: \$					<u>F0</u>	OR OFFICE US	SE ONLY:
Date Received:					1	Date Receiv	ved:	
Total Payment: \$ Payment Amount:	☐ Cash ☐ E-Transfer	Total Pay	ment: \$			Payment A	mount:	
☐ Cash ☐ E-Transfer							☐ Cash ☐ E-7	Transfer



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MEDIA CONSENT FORM

March Break Camp [2025]

Attn: Parent(s)/Guardian(s)

Throughout our <u>March Break Camp</u> program, Fun on the Run's qualified educators will be taking photos of your child engaged in learning, to use the data as pedagogical documentation. This will help to make your child's experience at Fun on the Run visible within our program outlets (social media).

Documentation of photos will also be used to share within our monthly newsletters, our private and public online platform on *Instagram*, and Fun on the Run's website (www.funontherunchildcare.com).

We are asking for your cooperation by consenting to have your child's photograph and work used for the purposes described above.

ACKNOWLEDGEMENT

I HAVE READ AND UNDERSTAND THE INFORMATION PROVIDED ON THIS FORM. I <u>VOLUNTARILY</u> GIVE FUN ON THE RUN CONSENT TO INCLUDE MY CHILD'S PHOTOS AND WORK ON PROGRAM BULLETIN BOARDS, MONTHLY NEWSLETTERS, INSTAGRAM AND FUN ON THE RUN'S WEBSITE.

I understand that this consent is only valid for the 2025 <u>March Break Camp</u> program and may be withdrawn by me at any time, upon written notice.

Child's Full Name	Date of Submission
Name of Parent/Guardian (Print)	Signature of Parent/Guardian

			I DO NOT PROVIDE MEDIA CONSENT FOR MY CHILD AT FUN ON THE RU	JN
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PERMISSION TO PARTICIPATE IN OFF-SITE WALKING EXCURSIONS

March Break Camp [2025]

Child's Information		
First Name	Last Name	

Parent/Guardian permission is required for your child to participate in camp-related walking excursions within the nearby school community and within walking distance of the school (i.e. walks to the local park) during <u>March Break Camp</u>. Such excursions must be approved by the Supervisor on-site and supervised by Fun on the Run's qualified team of staff. Where feasible, Fun on the Run will notify parents/guardians of these activities in advance, through e-mail or through posted daily itineraries.

Please check (☑):

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\square I $\frac{DO}{DO}$ give permission for my child to participate in camp-related walking excursions as described above.
$\hfill \hfill $

Name of Camp Location	Date of Submission
Name of Devent (Consulting (Duint)	
Name of Parent/Guardian (Print)	Signature of Parent/Guardian
Name of Parent/Guardian (Print)	Signature of Parent/Guardian
Name of Parent/Guardian (Print)	Signature of Parent/Guardian



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AUTHORIZATION FOR NON-PRESCRIPTION SKIN PRODUCTS

March Break Camp [2025]

Throughout our March Break program, there may be non-prescription skin products that you may **provide** your child with to be administe authorize con the following

	Sunscrean
iter	ms:
ısen	nt for Fun on the Run team members to support your child in the application of
cnii	d with to be administered daily. Therefore, this form has been provided to

- Sunscreen
- Lip Balm
- > Insect Repellent
- Lotions
- Hand Sanitizers
- Diaper Cream/Ointment (children with exceptionalities only)
- Other:

ACKNOWLEDGEWIEN			

I HAVE READ AND UNDERSTAND THE INFORMATION PROVIDED ON THIS FORM. I AUTHORIZE MY CONSENT FOR FUN ON THE RUN TO ADMINISTER AND/OR ASSIST MY CHILD WITH THEIR PROVIDED NON-PRESCRIPTION SKIN PRODUCTS.

I understand that this consent is only valid for the 2025 March Break Camp program and may be withdrawn by me at any time, upon written notice.

Child's Full Name	Date of Submission
Name of Parent/Guardian (Print)	Signature of Parent/Guardian

	I <u>DO NOT</u> PROVIDE CONSENT FOR AUTHORIZATION OF NON-PRESCRIPTION SKIN PRODUCTS
0	N MY CHILD AT FUN ON THE RUN.



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INFORMED CONSENT/PERMISSION FORM FOR OFF-SITE EXCURSIONS (TRANSPORTATION)

THIS FORM MUST BE READ AND SIGNED BY A PARENT/GUARDIAN WISHING TO ENROLL THEIR CHILD IN THE OFF-SITE EXCURSIONS SELECTED BELOW. PLEASE CHECK (☑) OFF THE EXCURSIONS YOU WOULD LIKE YOUR CHILD TO ATTEND:

☐ SKYZONE VAUGHAN	☐ YOUNG PEOPLE'S THEATRE
TRIP DATE: TUESDAY MARCH 11 TH , 2025	TRIP DATE: THURSDAY MARCH 13 TH , 2025

ELEMENTS OF RISK:

Educational activities that take place outside of the program involve certain elements of risk, some of which relate to transportation and traffic. Accidents may occur while participating in activities or while being transported to and from educational destinations outside of the school. Other elements of risk can also include falls, collisions, and other incidents, causing injury. The following list includes, but is not limited to examples of the types of injuries that may occur:

- 1. Bumps & bruising; muscle sprain & strain
- 2. Fainting; shortness of breath; dehydration
- 3. Cuts & scrapes; broken bones; dental injuries
- 4. Concussion; hit or blow to head
- 5. Head, neck and back injuries
- 6. Dismemberment; cutting, tearing

The risk of sustaining these types of injuries result from the nature of the activities and can occur without any fault of either the child, Fun on the Run Pre-School Centre and its employees, the transporter (LANDMARK) and its employees, or the facility where the activities are taking place. By choosing to take part in the activities selected above, you, the parent/guardian are accepting the risk that your child may be injured. The chance of an injury occurring can be reduced by carefully always following instructions while engaged in the activities. If you choose for your child to participate in the selected off-site excursions on the date(s) indicated above, you must understand that you bear the responsibility for any injury that might occur.

CONCUSSIONS:

Concussions will be monitored if a child has sustained a hit or blow to the head or body and shows signs or symptoms of concussion. Management of concussion is key to supporting the child during recovery. Please be advised that your child will be asked to seek medical attention if signs and symptoms of concussion arise. You are advised to view Dr. Evans's YouTube video with your child prior to the trip http://www.youtube.com/watch?v= 55YmblG9YM.



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METHOD OF PAYMENT

Fees Included – Please Check ☑ FT Registration Fee (CWELCC): \$110.00 (Week, Per Child) ☐ PT Registration Fee (CWELCC): \$22.00 (Per Day, Per Child) ☐ FT Registration Fee: \$300.00 (Week, Per Child) ☐ FT Additional Fees (Bus/Admission Costs): \$25.00 (Week, Per Child) ☐ PT Registration Fee: \$75.00 (Per Day, Per Child) ☐ Pizza Lunch Fee: \$ ☐ Camp Shirt Fee: \$15.00 (Per Child) ☐	☐ CASH ☐ E-TRANSFER (Follow instructions below) TOTAL AMOUNT: \$
Number of Children: Payment Submitted with Sibling: YES NO Full Name of Sibling:	
E-TRANSFER AGREEMENT RECIPIENT INFORMATION	
Name of Organization: Fun on the Run	
Email Address: camps@funontheruncentre.com	
IMPORTANT: If you are submitting more than one payment via e-transfe	r (i.e. registering siblings), ensure to
only submit ONE (1) transaction (payments combined), in order to limit to	the number of e-transfer payments.
Please note: All e-transfer payments must be sent to the administration <u>el</u> provide your child's <u>FULL NAME</u> and <u>CAMP LOCATION</u> in the NOTES section	 ;
PLEASE NOTE: All monies will be deposited <u>automatically</u> via e-transfer. provide a question and answer upon providing an e-transfer payment.	Families are no longer required to
SENDER INFORMATION	
Full Name (Please Print):	
Email Address:	
Phone Number:	
TRANSFER DETAILS	
Banking Institution:	
Payment Purpose:	
(Example: "March Break Camp Reg	istration")

Please ensure to complete this form in its entirety. If you have any questions, comments or concerns regarding e-transfer payments, please contact Fun on the Run's administrative team directly via email at commons.com.