

# Weekday Warriors Registration Form 2021-2022

Child's Name: \_\_\_\_\_

Parent / Guardian Name: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Mailing Address: P.O. Box: \_\_\_\_\_ Town: \_\_\_\_\_







Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

What School does your child attend? \_\_\_\_\_

What bus will they be taking from to the NDYC? \_\_\_\_\_

Weekday Warriors run from Monday - Friday from 3:00pm-5:30 pm\* for ages 5 - 12. The cost is \$18 per day. Registration is required. Register by e-mailing [youthcentre@nelson.ca](mailto:youthcentre@nelson.ca) or call 250-352-5656. Please note, space is limited and some dates may not be available depending on registration. **Please note we follow the SD8 Calendar.**

Please circle the dates you would like your child to attend:

-  Statutory Holidays
-  School Vacation Periods
-  Administrative Day
-  District Pro-D Days (NI Days)
-  School Pro-D and Planning Days (NI Day)
-  Early Dismissal (one hour early)

**SEPTEMBER 2021**

S	M	T	W	T	F	S
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4						

**OCTOBER 2021**

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31						

**NOVEMBER 2021**

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**DECEMBER 2021**

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# NDYC

Nelson & District Youth Centre

JANUARY 2022						
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FEBRUARY 2022						
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27	28	29	30	31		

APRIL 2022						
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MAY 2022						
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JUNE 2022						
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26	27	28	29	30		

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## Parental Consent Form/Release of Liability

Thank you for choosing to use the facilities, services and programs of the **NDYC**. We request your understanding and cooperation in maintaining both your child's and our health and safety by reading and signing the following **Parental Consent Form**.

Child's Last Name: \_\_\_\_\_

Child's First Name: \_\_\_\_\_

Child's Date of Birth: \_\_\_\_\_

Child's Home Address: \_\_\_\_\_

Name of Program Child is attending: \_\_\_\_\_

I consent to my child's participation in the above program. I am aware that there are risks associated with my child's participation in the above program, including the risk of injury, and I consent to have my child participate in the program in spite of such risks. I acknowledge that I have inquired about the nature of the activity, program or service and that I am not completely familiar with and I have been informed of any inherent risks.

I allow my child to partake in any off-site activities and allow them to ride the bus, trolley or walk to the destinations.

In the event that my child required medical attention, I consent to my child being transported to the nearest emergency center, including by ambulance if necessary, I accept that I am responsible for any such costs of an ambulance.

I acknowledge that it is my responsibility to advise City staff members of any medical or other condition that may affect my child's participation in the above program.

I further understand that personnel who may not be licensed, certified, or registered instructors or professionals conduct the activities. I accept the fact that the skills and competencies of some employees and/or volunteers will vary according to their training and experience and that no claim is made to offer assessment or treatment of any mental or physical disease or condition by those who are not duly licensed, certified or registered and herein employed to provide such professional services.

I give \_\_\_\_\_ Do not give \_\_\_\_\_ (please check one item) permission to have the City of Nelson and /or its community partners to take and use photographs of the above-mentioned child for any marketing or promotional items.

**I have read the Parental Consent/ Release of Liability form, understand and accept its terms.**

Parent/Guardian Name (please print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Parental Consent Form/Release of Liability

*This portion of the form is to be filled out for children and youth day camps and out trips, and must be submitted prior to your child starting the program or activity.*

Emergency Contact Name (1) : \_\_\_\_\_ Phone: \_\_\_\_\_  
Emergency Contact Name (2) : \_\_\_\_\_ Phone: \_\_\_\_\_

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Please list any medical conditions your child may have (Allergies, injuries etc...)

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**\*\*Please note that the responsibility for taking proper doses of medication cannot be assumed by staff and remains the sole responsibility of the parent\*\***

Family Doctor Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
MSP Number: \_\_\_\_\_

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My child will: Walk home after  Be picked up by a parent/guardian   
Who other (other than the parent/guardian listed above) has consent to pick up your child after the program?

Name _____	Phone _____
Name _____	Phone _____
Name _____	Phone _____

**Is there any other information that will help your child be successful with our programs?**



## **Nelson & District Youth Centre COVID-19 Policies and Procedures**

Please familiarize yourself with our policies before registering your child in any of our programs

Please review the **Child Care Safety Guidance for Parents** put out by the BC Centre for Disease Control. It contains information on COVID-19, the benefits of child care, and suggestions on how to explain the pandemic to your children.

**Visit:** <http://www.bccdc.ca/Health-Info-Site/Documents/School-childcare-safety-guidance-parents.pdf>

**The health and safety of your children and our staff is our number one priority.**

Please review ALL of the following information. We will require a completed and signed package to be submitted prior to the first day of your child(s) program.

### **Our New Normal**

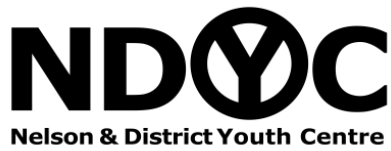
Our primary methods of keeping your child and our staff safe during camps are:

1. Active Monitoring for Symptoms
2. Maintaining Physical Distancing
3. Hand Washing & Sanitizing
4. Respiratory Etiquette

**If you're unwell– Stay at Home!**

**Full-Day Camps Only:** Each day, parents will be asked to complete an assessment questionnaire for their child.

Any child, parent, staff or visitor must not enter the Centre if they are sick, even if symptoms resemble a mild cold. Any child who arrives at the Centre with cold or flu like symptoms will not be permitted to enter the Youth Centre.



## **Nelson & District Youth Centre COVID-19 Policies and Procedures**

Please familiarize yourself with our policies before registering your child in any of our programs

### **Entrance - Program Arrival:**

Following sign-in, a staff member will accompany 1 to 3 children at a time to drop off their belongings in their groups' designated area.

Children entering the building must wash their hands for at least 20 seconds with warm water and soap immediately after depositing their belongings.

Each child will be given a daily summary of expected behavior:

- Cough or sneeze into elbow
- No physical contact with other children or staff
- Regular hand washing
- Proper use of toys and equipment
- No sharing of snacks or other items

**Children must be able and willing to follow these minimum requirements to participate in our Out-of-School programming.**

### **Program Departure:**

Pick-up will take place outside the main doors of the Nelson & District Youth Centre between 4:00pm - 5:30pm.

**Please call 250-352-5656 or email [youthcentre@nelson.ca](mailto:youthcentre@nelson.ca) to notify of early pick-ups.**

- A staff member will meet you outside the designated doors.
- Parents will line up, spacing a minimum of 2 meters from the next family when signing their child out.
- Parents are advised to allow ample time for check-out as it may take longer than usual.



## **Nelson & District Youth Centre COVID-19 Policies and Procedures**

Please familiarize yourself with our policies before registering your child in any of our programs

### **Please Note:**

- Any child, parent, staff or visitor must not enter the space if they are sick, even if symptoms resemble a mild cold.
- Anyone returning from any international travel within the last 14 days will not be admitted into the Youth Centre.
- Unwell people waiting for a test or test result for COVID-19 will not be admitted into the Centre.
- Anyone with COVID-19 will not be admitted in the Centre.
- People who have been in close contact with COVID-19 cases during the period of isolation will not be admitted to the Centre.
- Children with mild cold symptoms must stay home until symptoms resolve or for 14 days, whichever is longer.

Each day, children and staff must complete a health assessment questionnaire. Any child, parent, staff or visitor must not enter The Centre if they are sick, even if symptoms resemble a mild cold. Any child who arrives at The Centre with Cold or Flu like symptoms will be sent home immediately.

### **If a child becomes sick:**

- Symptomatic children will immediately be separated from others in a supervised area until they can go home. A staff member will remain with the child at all times.
- The parent or an emergency contact will be notified to pick up the child immediately. If a child presents COVID-19 symptoms, the child will need to be tested for COVID-19 and will not be allowed back to any program until all symptoms subside and a negative test result is provided.
- The area where the symptomatic child was placed will be thoroughly cleaned and sanitized after the child is picked up.
- Children or staff who have been exposed to a person with a confirmed case of COVID-19 will be excluded from the Centre for 14 days.
- If a child or an immediate family member is being investigated through contact tracing, by public health to confirm if they have COVID-19, the Youth Centre will seek direction on how to proceed from Interior Health Authority.



## **Nelson & District Youth Centre COVID-19 Policies and Procedures**

Please familiarize yourself with our policies before registering your child in any of our programs

### **Copy for the Nelson and District Youth Centre**

**I have read the Nelson and District Youth Centre COVID-19 Policies and Procedures understand and accept its terms.**

Parent/Guardian Name (please print): \_\_\_\_\_

Parent/Guardian      Signature      \_\_\_\_\_

Date: \_\_\_\_\_

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### **Copy for the Parent/Guardian**

**I have read the Nelson and District Youth Centre COVID-19 Policies and Procedures understand and accept its terms.**

Parent/Guardian Name (please print): \_\_\_\_\_

Parent/Guardian      Signature      \_\_\_\_\_

Date: \_\_\_\_\_