

# ONTARIO SCIENCE CENTRE DAY CAMPS

## SUMMER 2020 DAY CAMP APPLICATION FORM

In this application, you are registering on behalf of a minor and are their parent/legal guardian and as such, you are fully authorized to enter into this agreement on their behalf.

Please print clearly and use one form per camper. Keep a copy of your completed form(s). Incomplete application forms or forms with partial payments will not be processed. Mail or fax completed booking forms to:

**Recreational Programs**, Ontario Science Centre, 770 Don Mills Road, Toronto, ON, M3C 1T3 Fax: 416-696-3139

### CAMPER INFORMATION

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Age at time of camp \_\_\_\_\_ (on earliest camp date selected)

### PARENT/GUARDIAN INFORMATION

Only a custodial parent or legal guardian for this camper should be listed below, as this person will be the only one able to access and change this camper's information before and/or during Camp. (For example: changing the persons authorized to pick up this camper.)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_ Daytime \_\_\_\_\_ Tel \_\_\_\_\_

Cell \_\_\_\_\_ Evening Tel \_\_\_\_\_

Email \_\_\_\_\_ (Camp communications will be emailed to this address)

### PERSON(S) AUTHORIZED TO PICK UP CAMPER:

The Centennial Centre of Science and Technology, also known as the Ontario Science Centre, may release my child into the care of the following individual(s) during the Camp day or at the end of the Camp day. **Only those people listed here as well as me (as the registering parent /guardian) and the Emergency Contact, will be able to pick up my child.** All will need to show personal photo identification. Each name listed here must match the name on the identification (do not list a nickname).

1. First Name \_\_\_\_\_ Last Name \_\_\_\_\_

2. First Name \_\_\_\_\_ Last Name \_\_\_\_\_

3. First Name \_\_\_\_\_ Last Name \_\_\_\_\_

### EMERGENCY CONTACT

Contact if the registering parent/guardian cannot be reached.

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Tel \_\_\_\_\_

### PLACEMENT PREFERENCE

Please try to group my child with their friend (friend's first and last name) \_\_\_\_\_.

**We are not always able to place friends or siblings together.** Children should not be more than 1 year apart in age if you are requesting they be put together. **Confirmation of if we are able to accommodate your request is sent just prior to camp.** The Ontario Science Centre reserves the right to make final decisions as they relate to camp groupings.

### CANCELLATION/MODIFICATION POLICY

Cancellations received prior to Friday, June 5, 2020 and all modifications are subject to a \$70 administration fee. No refunds will be given for cancellations made after June 5, 2020.

# SUMMER 2020 DAY CAMP APPLICATION FORM (Continued)

## CAMP THEME CHOICES – Themes cannot be repeated.

### HALF-DAY CAMP, 4-5 years

#### Little Scientists

July 6-10/20

**AM** -9:00 – 11:45 a.m.  
**PM** -1:15 – 4:00 p.m.

July 20-24/20 **AM**

**AM** -9:00 – 11:45 a.m.  
**PM** -1:15 – 4:00 p.m.

August 4-7/20\*

**AM** -9:00 – 11:45 a.m.\*  
**PM** -1:15 – 4:00 p.m.\*

\*4-day camp

### HALF-DAY CAMP, 4-5 years

#### Little Astronauts

July 13-17/20

**AM** -9:00 – 11:45 a.m.  
**PM** -1:15 – 4:00 p.m.

July 27-31/20

**AM** -9:00 – 11:45 a.m.  
**PM** -1:15 – 4:00 p.m.

August 10-14/20

**AM** -9:00 – 11:45 a.m.  
**PM** -1:15 – 4:00 p.m.

### FULL-DAY CAMP, 5-12 years

#### Ingenious Engineers

July 6-10/20

July 20-24/20

August 4-7/20\*

August 17-21/20

August 31-September 4/20

\*4-day camp

Add Extended Care

### FULL-DAY CAMP, 5-12 years

#### Food Science

July 13-17/20

July 27-31/20

August 10-14/20

August 24-28/20

Add Extended Care

### FULL-DAY CAMP, 13-14 years

#### Science Centre

#### Innovators

August 17-21/20

August 24-28/20

Add Extended Care

## CAMP FEES

FULL-DAY CAMPS	EARLY BIRD SPECIAL!	
	Before April 12	After April 12
5-Day		
OSC Members*	\$295	\$320
Non-Members	\$320	\$345
Extended Care	\$75	\$75
4-Day		
OSC Members*	\$230	\$255
Non-Members	\$255	\$280
Extended Care	\$60	\$60
<b>HALF-DAY CAMP</b>		
5-Day		
OSC Members*	\$175	\$190
Non-Members	\$190	\$205
4-Day		
OSC Members*	\$145	\$160
Non-Members	\$160	\$175

## CALCULATE THE COST

As the registering parent/guardian with a current Planetary, Stellar, Galactic or Cosmic level Ontario Science Centre Membership holder you are eligible for our Member discount.

Membership # \_\_\_\_\_

Primary Cardholder Name \_\_\_\_\_

	Price	# of Weeks	Total
Fee (Non-Member or Member)	\$ _____	x _____	= \$ _____

Add Extended Care	\$ _____	x _____	= \$ _____
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Your cost per Camper = \$ \_\_\_\_\_

Price includes all applicable taxes. Additional coupons and/or passes do not apply. Fees waived for Support Persons accompanying Camp participants with disabilities.

### PAYMENT BY CREDIT CARD (Visa, MasterCard or AMEX only)

Credit Card # \_\_\_\_\_

Expiry Date (month/year) \_\_\_\_\_

Amount \$ \_\_\_\_\_

Cardholder Name \_\_\_\_\_

## CAMP PARTICIPATION WAIVER/MEDICAL CONSENT STATEMENT

I understand as a parent/guardian of a child who is a participant in Camp at the Centennial Centre of Science and Technology, also known as the Ontario Science Centre, my child will participate in activities on the grounds of the Ontario Science Centre, including the adjacent parklands and wetlands. I agree that the choice to participate brings with it the assumption of those risks and results that are part of these activities. I agree that the Ontario Science Centre, its trustees, officers, directors, employees, agents and independent contractors, shall not be liable for any injury to my child or any loss/damage to my child's personal property arising from, or in any way resulting from, my child's participation in these activities. I authorize the Ontario Science Centre to administer first aid to my child and to secure medical care for my child in an emergency as deemed appropriate by the attending physician(s). I certify that the information provided in this registration form is, to my knowledge, true and complete. I have read and understood the above waiver and consent and confirm that I am the parent or legal guardian of the child mentioned herein who is a minor. I confirm that I have the complete custody, care and control of the minor and have the legal authority to sign this consent and waiver on behalf of the minor and that the consent of no other person or entity is required.

Name of parent/legal guardian \_\_\_\_\_ Date \_\_\_\_\_

Signature of parent/legal guardian \_\_\_\_\_

This information is collected under the authority of the Centennial Centre of Science and Technology Act, for registration purposes. From time to time, the Science Centre may also send you information about other activities, programs, promotions and opportunities to contribute to the Ontario Science Centre and to conduct customer research. If you do not wish to receive this information or if you have any questions about this collection please contact: Manager, Recreational and Family Learning Experiences, Ontario Science Centre, 770 Don Mills Road, Toronto, ON M3C 1T3 Phone: 416-696-3256