AGES 6-8 APRIL DAY CAN		TERMS AND CONDITIONS, WAIVER AND RELEASE
DAY CAN	IPS The second s	1. Liability Waiver and Release
EcoBuilders: April 2-5, 2024 4-Day Camp: Members: \$184 plus GST Non-members: \$230 plus GST	Drop-off and pick-up times are between 8:30 and 9:00 AM, and 4:30 and 5:00 PM. IMPORTANT: You must complete a separate form	In consideration of the child named on this form ('the camper') being allowed to participate in Saskatchewan Science Centre's Day Camp, the camper's parent or guardian, hereby releases the Saskatchewan Science Centre and its directors, officers, servants, representatives and agents from and against all claims, actions, demands, costs and expenses relating to injury, death, damage to person or property or loss of property, howsoever caused, arising out of, or in connection with, the camper's participation in Saskatchewan Science Centre's Day Camp Program.
	for each child.	2. Payment conditions and refund policy
PARTICIPANT INFORMATION: Child's Name D Allergies, medical conditions or special needs	ate of Birth	Full balance of fees must be received with camp registration form. Cancellations received less than 7 days prior to the start of camp session will not receive any refund of fees, unless a doctor's certificate stating medical reasons is presented to the camp. Cancellations received 8 or more days prior to the start of camp session will be refunded MINUS a \$50.00 administration fee.
		3. Photography / Video Release
PARENT/GUARDIAN INFORMATION:		Parent/Guardian authorizes Saskatchewan Science
Parent / Legal Guardian		Centre to take photographs and/or video of the child named on this form during camp activities, and otherwise use of these images, without charge solely for the purpose of promotional materials in connection with Saskatchewan Science Centre.
Home Address		4. Medical Release
City	Province Postal Code	To the best of my knowledge, my child is in good
Daytime Phone Cellular Number Home Phone	E-mail Address	health. I will notify the camp, in writing, if my child is exposed to any infectious disease, or if any
Dayante Fronte Contain Number Fronte Fronte	E mai Address	change in health status occurs during the three weeks (21 days) prior to camp session. In case of
Emergency Contact Person Em	ergency Phone Number	emergency, I understand every effort will be made to contact me. In the event that I cannot be reached,
PAYMENTS:		I hereby give permission to the physician selected by Saskatchewan Science Centre to hospitalize,
		secure proper treatment, order injection, anesthesia or surgery for my child. In the event that medication,
Saskatchewan Science Centre Membership Number (if applicable)		medical advice, treatment and/or equipment are required, I agree to accept financial responsibility
☐ Cash/Debit☐ Cheque payable to Saskatchewan Science Centre (no p	ostdated cheques)	for fees in excess of provincial and/or private medical insurance.
☐ VISA ☐ MasterCard		This release shall be binding upon the camper,
Card Number	Expiry Date & CVV	the undersigned and the estates of the camper and the undersigned. I have read and understood the above RELEASE.
Cardholder's signature	 Date	
		Signature of Parent/Guardian
Mail, fax or drop off completed registration forms and payment to):	

DAY CAMP BOOKINGS

Saskatchewan Science Centre 2903 Powerhouse Drive, Regina, SK S4N 0A1

Tel: 306-791-7943 Fax: 306-525-0194

Email: bookings@sasksciencecentre.com

Receipt and confirmation details will be sent upon full completion of registration.

Signature of Parent/Guardian	
Date	

