

## Emergency Information

(RPS Form 1)

This form is designed to gather the necessary information that would be required in case of an emergency for participants 4-15 years. This form must be completed and handed in to the program leader on the first day. Admittance to the program may be denied if this form is not completed in full.

Child's Name:	Birth date:
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### Parent/Guardian Information:

<b>Parent #1/Guardian:</b>		
Home Phone:	Work Phone:	Cell Phone:
<b>Parent #2/Guardian:</b>		
Home Phone:	Work Phone:	Cell Phone:
<b>Emergency Contact:</b>		
Relationship:	Phone:	Cell Phone:

### Medical Information

Medical Insurance/Care Card Number:
Allergies/ Conditions: <input type="checkbox"/> Asthma <input type="checkbox"/> Allergies <input type="checkbox"/> Diabetes      Other: _____
<b>If any of these items are severe or your child has any other conditions or requires support in any way please contact the department to speak with a Recreation Programmer prior to the start of the program.</b>
*** If Medication is required during camp hours, please fill out a Medication Information form and attach ***

### Medication Information Form Attached

Yes       No       N/A

### Pick up and Drop off Policy

RDN Recreation and Parks has a sign in/sign out policy for programs, unless otherwise noted. Please ensure that you come in each day to sign your child in and out. All participants need to be released to the designated responsible adults.

### Other individuals who may pick up my child are

Name	Phone	Relationship to Child
Name	Phone	Relationship to Child
Name	Phone	Relationship to Child

If there are any custodial issues we should be aware of, please attach additional information.

**Please complete both sides of this form**

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### Emergency Information Consent

Dear Parent/Guardian:

Thank you for choosing the RDN, Recreation and Parks for your Recreation Program experience. We request that you read and sign the informed consent.

I \_\_\_\_\_ parent, or guardian of \_\_\_\_\_ give full permission for my child to engage in all program activities and I understand that there are risks inherent to the activities my child will partake in. I understand that care and attention will be given to the safety of all participants but that Recreation and Parks, its staff or volunteers cannot be held liable for any injury or loss which was not directly caused by their failure to meet the standard of care.

#### Registration/Refund Policy:

1. Registration is accepted on a first-come, first-served basis.
2. Programs with insufficient registration are subject to cancellation.
3. A refund will be issued for summer and spring break camps if we receive withdrawal notice seven (7) days in advance. Withdrawal from programs and lessons requires 72 hours prior to program start date for a full refund.
4. Your child can be refused admittance to the program if this form is not completed and returned.
5. I give consent for staff/contractors at RDN Recreation and Parks to seek emergency medical care (911) for my child if necessary.

**I have read the information in this form and understand the policies of the Regional District of Nanaimo, Recreation and Parks Programs.**

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

**This form must be completed and handed in to the program leader on the first day.  
Admittance to the program may be denied if form is not completed in full.**

Personal information you provide on this form is collected under the authority of the *Local Government Act* and the applicable *Recreation Program Bylaws* and will only be used for purposes related to the internal administration of an RDN recreation program. Your personal information will not be released except in accordance with the *Freedom of Information Protection of Privacy Act*. Questions about the collection of your personal information may be referred to the Information & Privacy Coordinator, 1-877-607-4111.

## COVID-19 Assumption of Risk & Permission Form

BY SIGNING THIS DOCUMENT, YOUR AND YOUR CHILD'S LEGAL RIGHTS MAY BE AFFECTED

**PLEASE READ CAREFULLY!**

Dr. Bonnie Henry stated on May 16, 2020 that "COVID-19 is new for all of us". We at the Regional District of Nanaimo responded to the direction from our public health officials to first close our facilities and cease offering services. We are now responding to the direction to reopen our facilities and offer services to our community cautiously, with the safety of our staff and community being our priority.

COVID-19 remains a worldwide pandemic and a threat to our local health and safety. We know the following (this list is not intended to be exhaustive):

1. The infectious agent, SARS-CoV-2, has caused community transmission of a serious communicable and potentially fatal disease known as COVID-19 amongst the population of the Province of British Columbia;
2. Our public health officials have determined this constitutes a regional event as defined in section 51 of the *Public Health Act*;
3. A person infected with SARS-CoV-2 can infect other people with whom the infected person comes into contact with; and
4. The gathering of people in close contact with one another can promote the transmission of SARS-CoV-2 and increase the number of people who develop COVID-19.

We cannot be certain that a person (of any age) will not contract SARS-CoV-2 at one of our facilities and/or while participating in one of our programs, but we have taken the steps required to develop our COVID-19 Safety Plan, which is available for your review at <https://www.rdn.bc.ca/covid-19-safety-plans-and-risk-assessments> We have also developed COVID-19 policies and procedures, which are available for your review here <https://rdn.bc.ca/recreation-emergency-form>. We have implemented our COVID-19 Safety Plan and will be applying our policies and procedures, but **the risk remains that a COVID-19 outbreak could occur despite our best efforts.**

It is vital that no person who feels sick in any way visit any of our facilities and/or utilize any of our services. We do not employ health professionals and do not screen for potential illness. It is also vital that no person bring a child to any of our facilities if the child is feeling unwell or showing any symptoms of illness. Again, we do not screen for same.

For our camps and other programs for children, we will not be enforcing physical distancing amongst the children. We will be reducing the number of children in each program compared to our standard practices. We will emphasize hygiene and provide for handwashing as children begin and end their days in our programs. However, it is vital that children be permitted to play and this includes games where there will be touching (such as tag) and use of playground equipment. Most or all activities will take place outdoors. If your preference is solely for outdoor activity, please select a program for your child that provides the same.

It is vital that any person who believes that they may have become ill or their child may have become ill within 14 days of visiting one of our facilities and/or while taking part in one of our programs report this immediately to us by contacting RDN Recreation and Parks at 250-248-3252 and seek appropriate medical attention by first calling 8-1-1. We will share personal information for the purposes of contact tracing if the need arises. To attend our facilities and/or take part in our programs and/or send a child to same, you must consent to the same.

Please do not allow your child to participate in any of our activities or programs if your child has:

- experienced cold or flu-like symptoms within the last 14 days;
- been in close contact with anyone else who has had these symptoms in the last 14 days; or
- been in close contact with anyone else who has travelled outside of Canada in the last 14 days.
- been told to self-isolate by Public Health

Please note: If your child is displaying symptoms of respiratory distress or illness, they will be asked not to participate.

Lastly, it is vital that we all be calm and compassionate throughout this pandemic. Any person who exhibits any aggression towards our staff or any other person in one of our facilities and/or programs will be asked to leave and not return.

If you would like more information regarding the risks associated with COVID-19 for children, please review the following BC CDC publications:

[COVID-19 Public Health Guidance for K-12 School Settings](#)

[COVID-19 Public Health Guidance for Child Care Settings](#)

I/we have read, understand and agree to the Assumption of Risk and Permission Form.	INITIAL HERE
I/we have reviewed the Assumption of Risk and Permission Form with my/our child and have instructed our child to listen to and follow the instructions provided.	INITIAL HERE

\_\_\_\_\_  
Name of Child

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Print name clearly

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email Address