



Brickineers Course

Participant Information Form

Please fill out one form per child.

CHILD INFORMATION

Child's Name: _____ Home Phone No: _____

Birthdate (D/M/Y): _____ Age: _____ Male Female

Child's Address: _____ City/Province: _____ Postal Code: _____

Hair Color: _____ Eye Color _____ Height: _____ Weight: _____

PARENT/GUARDIAN INFORMATION

1. Name: _____ Email address: _____

Relationship to child: _____ Day Phone #: _____ Cell: _____

2. Name: _____ Email address: _____

Relationship to child: _____ Day Phone #: _____ Cell: _____

Child resides with: Mother Father Both Other

EMERGENCY CONTACT INFORMATION (Other than parent; must be a Calgary resident)

1. Name: _____ Relationship: _____

Contact Numbers: Home _____ Work _____ Cell _____

Approved Individuals for Child Pick-Up (Photo Identification will be required)

The following individuals are allowed to pick up my child:

1 _____ Phone Number: _____

2 _____ Phone Number: _____

Is there a custody arrangement or court order in effect? Yes No

If so, a copy must be provided prior to start date.

SELF SIGN IN/OUT AUTHORIZATION 9yrs and Older

At the end of each class all children must be signed out. Do you authorize your child (9yrs and older) to sign themselves in and out for Brickineer courses? Yes No

I understand that upon self-sign out of Brickineer courses Brickineers™ is no longer responsible and I release the owner/operator of Brickineers™ of any liability and agree to preset a designated meeting place with my child.

Parent/Guardian Signature _____ Date _____

PHOTO RELEASE

During course time digital media may be taken for media or marketing purpose. If you are willing to have your child participate in film or photo opportunities please sign the image release below.

I agree to grant Brickineers™ permission to take and publish still photographs and moving videos, or publish those previously taken of my child. These pictures will be used by Brickineers™ for the purpose of displays and promotion only.

I give permission for my child's photo to be taken []

I do not give permission for my child's photo to be taken []

_____, 2015
Parent/Guardian Printed Name Parent/Guardian Signature Date

MEDICAL INFORMATION

Family Physician: _____

Phone Number: _____

Alberta Health Care Number: _____

Does your child have any allergies? (If so please list) _____

Does your child have any medical conditions? (If so please list) _____

Are your child's immunizations up to date? Yes No

Do you have any concerns about your child's development? (Please explain)_

Does your child have concerns with the following? (Please circle) Physical: Vision, hearing, speech, nutrition, clumsiness, sleep, other please list:

Behaviour:
or other (please list):

Does your child have any medical/emotional conditions requiring treatment or supervision? Yes No

If yes please list _____

Parent/Guardian Signature

_____ Date

_____, 2015

MEDICAL STATEMENT

In case of emergency or illness, every effort will be made to contact the parents or guardians. In the event that contact cannot be made, I agree that in case of emergency or illness, a qualified medical attendant may attend to my child.

I Agree I do not agree

Parent/Guardian Signature _____

Date _____, 2015

POLICIES AND CONSENT

PARTICIPANT RISK ACKNOWLEDGEMENT AND INFORMATION Parent/Guardian Initial _____

As a condition of participation in this program, the participant does so at his/her own risk and neither Brickineers™ or its employees, nor its volunteers will be liable for any loss, damage or injury whatsoever that may occur during any part of his/her participation. The participant or parent/guardian of the participant agrees to pay for any ambulance services required and authorizes the Brickineers™ to send participant directly to the hospital by ambulance at their discretion. All participants with a disability, allergy and/or medical condition which may affect their participation in the program must inform our staff at time of registration.

LATE PICK-UP POLICY Parent/Guardian Initial _____

Pick-up times are the end of class time unless otherwise posted in the class or camp information page.

If a parent/guardian or approved individual for pick-up is going to be late it is asked that they notify program staff by calling or texting 403-399-7622.

A late pick-up fee of \$1.00 per minute per child is charged after final pickup time. If an emergency arises, please call or text (403) 399-7622 and leave a message that you will be late so we can explain to your child that you are on your way. Please note that repeated late pickups might result in termination from the program.

I certify that the all of the above information is current and accurate to the best of my knowledge.

_____, 2015
Parent/Guardian Printed Name Parent/Guardian Signature Date

This personal information is being collected under the authority of the Freedom of Information and Protective and Privacy Act and is solely for the purpose of the Brickineers™ Lego or VEX Robotics courses. For more information contact Brickineers™ @ 403-399-7622