



CONTINUING
EDUCATION

2011 Summer Camps Waiver Form

Thank you for registering your child in an exciting week of Summer Camp at
Red Deer College!

***The completion of this form is mandatory for your child's attendance in our
summer camp.***

***Please return your completed & signed form to us as soon as possible as this
form MUST be on file prior to OR accompany your child on their first day of
camp. If we do not have this form, they will not be allowed to participate.***

Registrant Information

Legal Last Name: _____

Legal First Name: _____ Legal Middle Name: _____

Preferred First Name (if different from legal): _____

Gender: ___ Male ___ Female Date of Birth: M ___ / D ___ / Y _____

Food Allergies / Special Diet: _____

Medical Concerns / Conditions: _____

Parent(s) / Guardian(s) Name(s): _____

Emergency Contact Name: _____ Relationship: _____

Home #: (_____) _____ Daytime #: (_____) _____

Individuals Authorized to Pick-up / Sign-out the Participant (Full Legal Name): _____

Course Information

Course Name: _____

Course #: _____

FOIPP Statement

The personal information you provide is being collected under the authority of the Post-Secondary Learning Act and the Freedom of Information and Protection of Privacy Act of Alberta. The information will be used by Continuing Education for purposes including registrations, providing tax receipts, recruitment, distributing follow-up educational information, college research and statistical reporting. The information will be protected in compliance with the provisions of the Freedom of Information and Protection of Privacy Act of Alberta. The information will be retained in accordance with Information Management policy and guidelines. If you have any questions about the collection and use of this personal information, please contact Continuing Education, Red Deer College, 100 College Blvd., Box 5005, Red Deer, Alberta, T4N 5H5, Telephone: (403) 356.4900.

Consent To Use Personal Image

Your consent is required to use your personal information, of which a photo is considered, by Red Deer College for the purpose of developing promotional materials which may include brochures, audio-visual productions, print and electronic documents or productions. As noted above your personal image and information will be protected in compliance with the provisions of the Freedom of Information and Protection of Privacy Act of Alberta.

By checking "Yes, I agree." below, I understand that I am giving consent to use and disclose my personal image (or the personal image of my child) for promotional and/or informational purposes.

Yes, I agree

No, I do not agree

Waiver

By payment of the registration fee the participant accepts the risks of physical injury normal to the course or activity in which they are registered.

Parent / Guardian Signature: _____ **Date:** _____

**Please return form by fax or mail to -
Fax #: (403) 342-3278
Mail: Red Deer College, Attention: Continuing Education,
Box 5005, Red Deer, AB T4N 5H5
For Further Information: (403) 356-4900**