



CAMP PAL-O-MINE SUMMER 2026 WAIVER

Child's Name

Date

1) FIRST AID / EMERGENCY MEDICAL TREATMENT

In case of emergency during any activity supervised by YECC/Camp Pal-O-Mine staff, I/we, the Parent(s)/Legal Guardian(s) of the above named child, hereby authorize the staff to apply **first aid treatment and/or request emergency medical treatment** for the above named child.

Parent/Legal Guardian(s) Initials

2) FIELD TRIPS & OUTINGS

I/We hereby consent to have the above named child leave the premises of Camp Pal-O-Mine (Yonge Eglinton Community Centre, 160 Eglinton Ave. East) from time to time **to participate in field trips and outings to places of interest as part of the planned camp program**. It is understood that supervision will be provided by YECC/Camp Pal-O-Mine staff.

Parent/Legal Guardian(s) Initials

3) SWIMMING & WATER ACTIVITIES

I/We hereby consent to have the above named child participate in **all swimming, wading pool, and water activities** provided by and supervised by YECC/Camp Pal-O-Mine staff. I/We have noted my/our child's **swimming ability/level** on the Camp Registration Form.

Parent/Legal Guardian(s) Initials

4) PHOTOGRAPHS & MEDIA RELEASE

I/We hereby consent to allow YECC/Camp Pal-O-Mine staff to take **photographs** of the above named child while he/she is engaging in program activities. These photographs may be used for identification purposes on outings/trips, on YECC's website, **on YECC's Social Media Accounts**, in YECC's archives and/or **may be reproduced in publications such as community newspapers**,

Parent/Legal Guardian(s) Initials

5) RESPONSIBILITY TO REPORT ABSENCES

I/We hereby understand and agree that, as Parent/Legal Guardian(s) of the above named child, **it is my/our responsibility to advise Camp Pal-O-Mine either by telephone (416-392-0511, ext. 0) or in writing if the above named child will be absent from camp, on any day, for any reason.**

Parent/Legal Guardian(s) Initials

6) SUNSCREEN

I/We hereby consent to allow YECC/Camp Pal-O-Mine staff to apply the **parent-provided sunscreen** to the above named child prior to going on outdoor activities. I/We will send sunscreen with my/our child, clearly **labeled with my/our child's name**. I/We understand that sunscreen is not supplied by Camp Pal-O-Mine.

Parent/Legal Guardian(s) Initials

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7) HAND SANITIZER

I/We hereby consent to allow YECC/Camp Pal-O-Mine staff to apply the **parent-provided hand sanitizer** to the above named child.

I/We hereby consent to allow YECC/Camp Pal-O-Mine staff to apply the **camp hand sanitizer** should the above named child not bring their own.

Parent/Legal Guardian(s) Initials

8) INSECT REPELLENT DECISION

I/We understand the risks and benefits associated with the use of insect repellent, and hereby provide YECC/Camp Pal-O-Mine with the following decision:

YES, the above named child is allowed to use insect repellent at camp or during camp activities. I/We will send the insect repellent with my/our child, clearly labeled with my/our child's name and application instructions. I/We understand that insect repellent is **not** supplied by Camp Pal-O-Mine.

NO, the above named child is NOT allowed to use insect repellent at camp.

Parent/Legal Guardian(s) Initials

9) PERMISSION FOR THE CHILD TO LEAVE ON THEIR OWN AT THE END OF THE CAMP DAY

NOT APPLICABLE

Parent/Legal Guardian(s) Initials

OR

I/We hereby consent to have the above named child **leave Camp Pal-O-Mine unaccompanied**, at either the regular time designated by me/us (please indicate: 4:00 p.m. or 6:00 p.m. or _____p.m.), or when written direction is given by myself/ourselves or _____.

I/We hereby authorize YECC/Camp Pal-O-Mine to release my/our child under the above listed circumstances, until further notice, and do hereby release the staff of YECC/Camp Pal-O-Mine from any and all responsibility after such release.

Parent/Legal Guardian(s) Initials

10) PERMISSION TO SHARE INFORMATION

I/We hereby understand that the information contained in the Camp Pal-O-Mine Registration Form and this Waiver will be shared amongst YECC/Camp Pal-O-Mine staff **only as absolutely necessary.**

Parent/Legal Guardian(s) Initials

PRINT Name of Parent/Legal Guardian

PRINT Name of Parent/Legal Guardian

SIGNATURE of Parent/Legal Guardian

SIGNATURE of Parent/Legal Guardian

Date

Date