



PD DAY CAMPS

INFORMATION PACK AND
FORMS WINTER/SPRING 2021

Pricing and Payment:

PD Day camps are \$60 per day. Family Membership holders receive a \$5 discount. Anyone booking **two or more camps** at one time receive a \$5 discount per day (discount cannot be applied to previously attended camps).

PD Day Camps are dependent on the health measures in place at the time of the camp. The Alberta Aviation Museum has put measures in place to ensure the safety of camp attendees and we will be limiting the number of spaces available in each camp. All campers will be required to wear a mask except when eating lunch and snacks.

Due to uncertainty surrounding COVID-19 measures we will not be accepting payment until the week before your camp, you will be contacted by the museum at this time. If your child is sick, please keep them home – you will receive a full refund for the camp.

Drop-off/ Pick-up:

Please be sure to arrive with in the drop-off (8:30am-9:00am) and pick-up (4:00pm-4:30pm) windows. Once you arrive in the morning you **must check in with program staff** to ensure all forms are completed and confirm who will be picking your child up. When arriving in the afternoon **check in with program staff** to confirm you are on the pick-up list.

Lunch and Snack Breaks

Send a packed lunch with your child **that does not need to be refrigerated or microwaved**. **Please note that we are NUT FREE!** Any snacks containing nuts cannot be opened. We will have a 45-minute supervised lunch break and two 15-minute supervised snack breaks.

What to bring:

- Indoor running shoes
- Ensure you have a packed lunch and enough snacks for the whole day
- Any medications (listed on the *Health Notification Form* with instructions)
- Make sure to wear comfortable shoes (we will be on our feet a lot throughout the day)
- A sweater (the museum is an historic building and gets chilly)

Museum Contact:

For any questions or concerns prior to the camp contact the museum's Programs Coordinator at **780.451.1175 ext. 108** or programs@albertaaviationmuseum.com.

On the day of your child's program please contact the museum at **780.451.1175**.



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Health Notification and Permission Form

The information contained in this form will be used to respond to medical and emergency situations.

Program staff and volunteers must receive this form for each child prior to the start of their program. The form will be kept on file for the duration of the file.

Child's Name: _____

Date of Birth: ____/____/____ (dd/mm/yy)

Parent/Guardian Name(s): _____

Emergency Phone Number: _____

Health Information:

Please provide a detailed response to the following questions and describe the necessary action in the event of a medical emergency.

1. Allergies (including food, medications, plants, animals):

2. Medical Behavioural Conditions (e.g. asthma, diabetes, epilepsy, ADHD, learning difficulties, etc.):

3. Medication carried (e.g. EPI pen, inhaler, Ritalin, etc.):

Permission for Treatment:

In the event of illness, injury or medical emergency, I hereby give permission to the Alberta Aviation Museum and/or its employees to administer medicine provided to the museum, administer basic first aid, contact an emergency service (911).

I agree to release and indemnify the Alberta Aviation Museum and its employee from any and all claim or loss resulting from medical treatment received by my child as a result of a medical emergency.

Signature of Parent/Guardian: _____ Date: _____



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Consent Form

I agree that the Alberta Aviation Museum and employees shall not be liable for any injury to my child or any loss or damage to my child's personal property arising from, or in any way resulting from, my child's attendance at or participation in the program. I hereby release and indemnify the Alberta Aviation Museum and its employees from any claims or damages arising from any injury, loss or damage.

I consent to videos and/or pictures being taken of my child during the Program for purposes of promoting the program or the Alberta Aviation Museum. I grant permission to reproduce, publish, or otherwise use my child's photographic likeness for such purpose. No other personal identifying information will be associated with the use of the photos or videos.

Child's Name: _____

Parent/Guardian's Name: _____

Parent/ Guardian's Signature: _____

Date: _____