



www.ApplegroveCC.ca



Applegrove March Break Program

For Children Ages 6-12 years

Location:	60 Woodfield Road (in Duke of Connaught School)
Time:	Monday March 12 to Friday March 16 9:00 a.m. to 5:00 p.m., Monday to Friday
Cost:	\$80 (Limited subsidies available)
Contact:	416-461-8143
Registration:	Deadline for afterschool participants by Jan. 31 Open registration starts February 1st



Come join us over the March Break for fun-filled activities such as crafts, active games, trips, cooking and special events. A light breakfast and snack included each day. For more information or to register your child, please call 416-461-8143. Limited spaces available. Register early to avoid disappointment.



Applegrove March Break Program

Applegrove is committed to maintaining services for children ages 6 – 12 years and is offering a March Break Program from Monday, March 12 to 16, 2012.

The Applegrove March Break Program will be packed with lots of fun and excitement for children ages 6-12! It's a great place to meet new friends and see familiar faces from the neighbourhood. As always, we've got some terrific activities planned. A light breakfast and a healthy snack each day; baking, creative arts, cooking, trips and kid's choice will keep participants busy.

Trained staff will also provide a safe, secure and structured environment where children from all backgrounds can develop their own potential, self-confidence and sense of responsibility. This is accomplished through a variety of social, educational, cultural and recreational activities.

Cheques should be made payable to "Applegrove Community Complex"

Program Information

Hours: 9:00 a.m. to 5:00 p.m. Program starts at 9 am; please notify office of late arrivals. Any pick-ups after 5 pm will result in a late payment fee of \$1.00 per minute. There will be a 10 minute grace period for the first occurrence.

Snacks: A light breakfast and healthy snack and drink will be provided each day of program at no additional cost. Please notify staff of any allergies at time of registration.

Lunches: Please send a lunch and a drink every day. Lunches **are not refrigerated** (mayonnaise and lunch meats can spoil quickly) and glass bottles and containers should be avoided.

Behaviour: Serious misbehaviour such as kicking, punching, racial slurs and verbal/physical threats **are completely unacceptable in our program**. Continuous acting out may result in suspension from the program.

Absences: Please call Applegrove Office 416-461-8143 to notify staff of any absences.

Fees: \$80 per child (Limited subsidy available) which includes transportation, activities and admission fees for trips.

For more information, drop by the Applegrove Office at 60 Woodfield Road (inside the Duke of Connaught School) or call 416-461-8143.

Please Register As Soon As Possible - Spaces Are Limited!

**** Please Note: If we do not reach a minimum registration of 10 children by March 2, the March Break Camp will not operate.****

Applegrove March Break Program 2012

Registration Form (Please Print Clearly)

Child's Surname _____

Given Name _____

Address _____

Postal Code _____

Date of Birth _____ Age _____

Gender: _____ Female _____ Male

School Attended _____

Grade Completed _____

(Parent 1) Surname _____

(Parent 1) Given Name _____

Relation to Child _____

Daytime Phone# _____

Evening Phone# _____

Cell Phone# _____

Email _____

(Parent 2) Surname _____

(Parent 2) Given Name _____

Relation to Child _____

Daytime Phone# _____

Evening Phone # _____

Cell Phone# _____

Email _____

Emergency Contact _____

Phone# _____

Relation to child _____

Allergies/Food Restrictions

____ Food ____ Drugs ____ Bugs ____ Plants ____ Other

Describe in detail:

Please describe any behaviour problems, disabilities or health problems your child has.

Does your child take any medication(s) on a regular basis? If so, please specify what kind, how often they take it, and if you need staff to administer or supervise. ****Please complete separate medication form****

Is there anything else you think we should know about your child? If so, please explain:

To ensure the safety of your child, please inform staff of any changes to your routine.

I give permission for the above named child to participate fully in both on and off site activities and trips, unless otherwise indicated in writing. I also give permission for emergency medical treatment to be carried out, should it be required, with the understanding that Applegrove staff will attempt to contact me at the telephone numbers listed above. Applegrove will not accept responsibility for such services/treatment. Having taken all reasonable precautions, Applegrove shall not be held responsible for any accident or sickness of this child.

Parent/Guardian Signature

Date

Home Safely Program

Our "Home Safely" program focuses on children's safety going home each day. For your child's safety, we must be notified in writing of any changes.

(Print all names, including both parents):

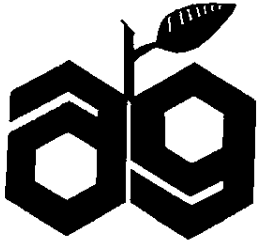
_____ will pick
up my child.

My child should go home on their own _____ leaving the program at _____ p.m.

Is there anyone who **SHOULD NOT** pick up your child? Yes _____ No _____

Name & relationship:

The personal information on this form is collected under the authority of the Community Recreation Centres Act R.S.O. 1990, c. C22, and By-law No. 1994-0792, known as Chapter 25 of the Municipal Code for the City of Toronto. It will be used by Applegrove staff to administer and supervise the program, to obtain care in an emergency, for statistical reports, and membership. Questions about this collection may be directed to Susan Fletcher, Executive Director, Applegrove Community Complex, 60 Woodfield Rd., Toronto M4L 2W6, or phone 416-461-8143.



APPLEGROVE COMMUNITY COMPLEX

60 Woodfield Road, Toronto, Ontario M4L 2W6

Tel: 416-461-8143 Fax: 416-461-5513

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“TOGETHER, BUILDING OUR COMMUNITY”



Photo Consent

I, _____ give permission for photographs
(Parent's given name) (Parent's surname)

that may include my child _____
(child's given name) (child's surname)

to be used in printed promotional materials for Applegrove Community Complex. I understand that the promotional materials may be distributed widely.

(Parent's signature)

(Date)