



Get on Board 2023

Calgary Transit Travel Training Summer Camp

PHOTO RELEASE WAIVER

In the course of activities, pictures may be taken and recordings may be made. Please advise us if you are willing to have your child's photograph used for the promotion of The City of Calgary.

I hereby grant The City of Calgary permission to take photographs and/or record audio and video clips of my child to use in whole or in part, for promotional purposes only.

I give my permission as set out above: _____ Date: _____
(Signature of custodial parent or guardian)

I do **not** give my permission: _____ Date: _____
(Signature of custodial parent or guardian)

INFORMED CONSENT FOR PARTICIPATION

Activities during the day camp are organised to set standards and guidelines for activity management including supervision, training, equipment, and health matters.

During day camp, your child may participate in activities supervised by The City of Calgary Staff, which may include but not limited to:

- Classroom training (Introduction to transit, route planning)
- Bus and CTrain training (Ride on Calgary Transit)

I have read and understood the information provided with this form. I understand that there is a degree of risk involved in some activities. After carefully considering all the risks involved and having full confidence that reasonable precautions will be taken for the safety and well-being of my child, I authorise my child to participate in the activities at Travel Training Day Camp as described above.

(Signature of custodial parent or guardian) Date: _____

The information on this form will be used at the discretion of the Day Camp leader to ensure care and attention is given to the health of the participants. All information on this form is considered **PERSONAL AND CONFIDENTIAL**.

Camp Participant Cell Number (If applicable): _____
This may be helpful if they have a tendency to wander from the group or they are late for camp.

Custodial Parent or Guardian: _____
Surname First Name

Phone: Home: _____ **Cell / Alternate:** _____ **Email:** _____



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If the above are unavailable in an emergency, please notify:

Emergency Contact: _____
Surname First Name

Phone: Home: _____ Cell/Alternate: _____ Email: _____

How will the participant be travelling to day camp? (i.e., Calgary Transit Access, Parent drop off)

Who is authorized to pick up the participant from this camp?

1. _____
Name Relationship

2. _____
Name Relationship

All participants must be independent in self-care (i.e. washroom use, course work). If participants need more assistance they must bring their own attendant. Attendants have been beneficial to help some participants focus and are welcome to attend the camp.

Will the participant be bringing an attendant to camp? Yes ☐ No ☐

What is the primary disability that the participant has been diagnosed as having?

The day camp program will include course work as well as transit riding. Does the participant have any physical, cognitive, or emotional conditions that would prevent him/her from fully participating in this program? Yes ☐ No ☐ If yes, please explain:

Allergies: Yes ☐ No ☐

If yes, please explain in detail (Please include food, environment, and medication information and course of treatment - e.g., EpiPen)

Is the participant currently subject to any of the following?

- ☐ Seizures / Convulsions ☐ Motion Sickness
☐ Respiratory Ailments ☐ Other- please Specify _____

Are there any behaviour concerns that staff should be aware of? (e.g., wandering off from the group or hard to motivate)



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Are there any communication or learning methods that staff should be aware of to better assist the participant? What is the literacy level (reading & writing) of the participant?

Is there a main goal or outcome that you would like the participant to take away from camp? (e.g., trip planning, exposure to transit, independence, etc.)

Is there any other information that staff should be aware of to fully assist in the care and attention of the participant? (e.g., lacks safety awareness when crossing streets, may get lost etc.)

****Please Note****

Behaviour management will be used to deal with dangerous, disruptive or socially unacceptable behaviour. Parents/Guardians will be contacted if there are any serious or recurring discipline concerns. We reserve the right to discontinue a participant's registration in such circumstances.

I, _____ hereby authorize The City of Calgary Staff responsible for the event to secure such medical advice and services as may be deemed necessary for the health and safety of the participant.

Signature of Parent/Guardian

Date: _____

The personal information collected herein is authorized under Section 33(c) of the *Freedom of Information and Protection of Privacy (FOIP) Act* of Alberta, for the purpose of facilitating the Get on Board Summer Camp with Calgary Transit Access. The information gathered provides statistical information and ensures accountability for Calgary Transit resources. Should you have any questions or concerns regarding the collection and use of your personal information, please contact Calgary Transit Access (1417C 33 Street SW) , at 403-537-7777, option 5, or feel free to email us at calgarytransitsaccesseligibility@calgary.ca.