

Youth Centre Membership Form



4725 43rd Street Upstairs
Phone: (403) 887-1193 or (403) 887-1137 ext. 223
Fax: (403) 887-1194 Email: youthservices@sylvanlake.ca

Dear Parent/Guardian;

The Sylvan Lake Youth Centre requires this information package to be filled out by all parents/guardians of all youth attending Youth Centre Programs. Please complete this form and return it to the Youth Centre as soon as possible for the safety and protection of your child. Memberships expire every year, therefore, a new form must be filled out each year. There is no cost for membership.

The Sylvan Lake Youth Centre has established policies and procedures for the safety of your child and for the daily operations of the Youth Centre. Please ensure that your child is aware that he/she is required to sign in and sign out to ensure that Youth Centre staff members are aware of who is in the Youth Centre at any given time.

It is our recommendation that all parents come and take a tour of the Youth Centre and meet the staff with whom your children will be spending their time. As well, we encourage parents to call the Youth Centre at any time to speak with a Youth Worker regarding programming or any changes/concerns of which we may need to be aware.

Monthly activity calendars are available at the beginning of each month. There is a calendar for Daze End Programs and a calendar for Evening Programs.

The Sylvan Lake Youth Centre is a drop-in activity facility and as such, can not be responsible for your child if he/she should decide to leave the building. Please ensure that your child has your contact information at all times as emergencies do occur and the Youth Centre could potentially close at anytime due to an unforeseen emergency (Ex: illness, staff shortages, gas leak, etc.).

The Youth Centre is not a substitute for a childcare provider. Please ensure that there is an adult available to your child at all times in the event that he/she needs to leave the Youth Centre suddenly.

You can reach the Youth Centre anytime by calling 403-887-1137 or 403-887-1193 or email youthservices@sylvanlake.ca.

Personal Information

Are you a first time member? YES NO

Member Information:

First Name:		Last Name:	
Age:	Birthdate:		<input type="checkbox"/> Male <input type="checkbox"/> Female
School Attending:		Grade:	
Email: (optional)			
Please name any allergies and/or medical concerns:			

Parent/Guardian's Information:

First Name:		Last Name:	
Address:		City:	PC:
Home Phone #:		Work / Cell #:	
Email:			

Emergency Contact Information: *(other than parent mentioned above)*

Name:	Relationship to Youth:
Home Phone #:	Work / Cell #:

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Youth Centre Waiver

I, _____, parent/guardian of _____ have read the attached information and as such, the Sylvan Lake Youth Centre cannot be held responsible should;

- a) My child have been dropped off without checking to ensure the Youth Centre is indeed open,
- b) my child should choose to leave the Youth Centre,
- c) the Youth Centre be required to close due to an emergency

Initial _____ In the event that neither I, nor my emergency contact person can be reached, I hereby consent to allow the staff of the Sylvan Lake Youth Centre, whether employed or volunteer, to contact a physician and/or arrange to transport my child to the nearest medical facility in case of an emergency.

Initial _____ I hereby give my permission for Youth Centre staff to take photographs of my child and that those photographs can be used in Youth Services marketing material (website, newsprint, brochures, etc).

Initial _____ I hereby give my permission for the above said staff to administer/perform medical emergency procedures (1st Aid, CPR) and take action as necessary for the health and wellbeing of my child. I understand that I will be responsible for all medical expenses.

Initial _____ I acknowledge that I have been informed of any inherent risks connected to the activities within the Sylvan Lake Youth Centre. I declare I have read, understood, and agree to the contents of this consent agreement in its entirety.

Parent/Guardian Signature

Date

Youth Services Program Coordinator
Signature

Date

Please complete and return as soon as possible

This information is being collected under section 33(c) of the Freedom of Information and Protection of Privacy Act and will be protected under the provisions of the Act. Should you have any questions about the collection of this information, you may contact the Town of Sylvan Lake FOIPP Coordinator at 403.887.2141 or at 4926-50 Avenue, Sylvan Lake Alberta T4S 1A1.