CAMP LIVINGSTON





WE ARE GOING TO CAMP!

Summer is here and our team is gearing up for our first ever day camp. Thanks to our partners at the Greater Moncton Men's Progress Club, we will be taking 30 youth to Camp Livingston in Alma (37 Livingston Lane, Alma, NB). We are inviting your child to join us on Thursday, July 20th for a full day of field games, nature walks, water activities, and FUN! Bus transportation to and from Camp Livingston will be provided.

IMPORTANT DETAILS

Date: Thursday, July 20th Time: 8:30 a.m. – 7 p.m.

What to bring: water bottle, sunscreen, hat, comfortable foot wear and a change of clothes.

- Bus pick up and drop off will be at the Giant Tiger parking lot on 80 Mapleton Rd.
- Please inform us of any allergies that your child may have as food and snacks will be provided during the day.
- Registration forms must be completed prior to departure. Forms can be completed online, or emailed to <u>allyson.caldwell@bigbrothersbigsisters.ca</u>. Registration will be open until Friday, July 14, 2023.

SCHEDULE OF THE DAY

- 8AM loading in the buses collecting permission forms
- 8:300AM Departure
- 8:30AM 10AM Bus (snack, ice breakers, songs)
- 10AM Arrival
- 10:15AM Circle Up (Expectations)
- 10:30AM Camp Games
- 11:30PM Lunch
- 12:45PM Breakout Sessions (stations / choose your adventure)
- 1:45PM Group hike /scavenger hunt
- 2:15p.m. Snack & water break
- 2:30 p.m. Camp Games
- 3:30p.m. Field Time & Swimming (lawn games)
- 4:30p.m. Supper & Campfire (dependant on weather conditions and daily fire regulations)
- 5:45p.m. Departure
- 7PM Arrival at Dropoff site (Giant Tiger)

CONSENT FORM

Youth Participant Information First Name: ______ Last Name: ______ Date of Birth (DD/MM/YY) _____ Age ____ Health Care #: ______ Does this child reside at the address provided in the parent/guardian information? Yes / No Please provide the address if different: Parent/Guardian Information First Name: _____ Phone Number (in case of emergency): Email: Alternative Emergency Contact (other than parents / guardians) First Name: ____ Last Name: ____ Phone Number (in case of emergency): _____ Relationship to child: If your child has allergies, please list them, as well as a description of their reactions and necessary treatment: List any medication(s) your child takes on a regular basis and for what medical condition that you feel we should be aware of: Are there any other medical issues we should be aware of? If so, please note them: If there are any other behavioral and/or emotional reactions we should be aware of, please note them below: Please state any other concerns, or notes you would like us to know: I, _____ (Parent/guardian name), the legal guardian of the above-named child(ren), consent to my child(ren) participating in the above-mentioned Big Brothers Big Sisters of Greater Moncton activity. Signature:

TRANSPORTATION CONSENT

We are thrilled to be working Atlantic Coach and appreciate their commitment to camper safety so that our staff can focus on keeping our campers safe, happy and engaged during the bus ride.

discharge, waive, and i	ndemnify Big Brothers Big Sisters	ation services to the campers and its organizers. I s of Greater Moncton and the Progress Club of Greater I claims, injuries, property damage, accidents, and	r
i, to my child(ren) partic through Atlantic Coacl	ipating in the transportation provi	legal guardian of the above-named child(ren), consen ided by Big Brothers Big Sisters of Greater Moncton	.t
Date:	S	Signature:	
MEDIA CONSENT			
Brothers Big Sisters of or youth as taken or prevents or match outing President/Executive D and/or by the National media information, adviced in websites and social me partners for program p	Greater Moncton the use of any peroduced by media personnel and/orgs, or otherwise authorized by the irector/CEO or Board of Directors, Office for purposes of promotional vertisements, audio-visual producted in Photographs or video producted.	National Office) and its associated member Big whotographs, audio and/or video recordings of my children National Office or Local Agency staff at recreational National President & CEO, local agency, and that this media may be used by Local Agency al material including brochures, posters, newsletters, tions and digital media, (such as the local agency ctions may also be shared with community and school of the state of the state of the second sections may also be shared with community and school of the state of the second sections may also be shared with community and school of the second sections may also be shared with community and school of the second sections are second sections.	l
Thereby give consent.	Signature of parent/ guardian	Date	_
-	concern: media release: If you do no ern, please sign below:	ot want your picture or your child's picture used or if	
I <u>do not</u> give consent:			_
Note: It is the parent/a	Signature of parent/ guardian uardian's responsibility to notify the	Date office if the status of this consent changes.	
F	in a confirmation of the state	- Julian Janear - Jan	