



## Seedlings Forest School Registration

Your information will be kept private and will not be shared with a third party without consent except in circumstances where we are legally required to do so.

### Child Information

Full Legal Name:	Goes by:
Date of Birth (dd-mm-yyyy):	Pronouns:
Home Address(es):	
Language(s) Spoken at Home:	
Height:	Weight:
Hair colour:	Eye colour:
Health card #:	
Program: <input type="checkbox"/> Preschool (Thurs) <input type="checkbox"/> Kinder Forest (Tues) <input type="checkbox"/> Forest Kids (Wed)	

### Parent/Guardian Information

Full Legal Name:	Pronouns:
Preferred Name:	Relationship to Child:
Primary Phone Number:	Alternate Phone Number:
Email address(es):	
Home Address: <input type="checkbox"/> Same as Child or other:	
Kivi Pass (individual or family): <input type="checkbox"/> yes <input type="checkbox"/> no	

Full Legal Name:	Pronouns:
Preferred Name:	Relationship to Child:
Primary Phone Number:	
Alternate Phone Number:	
Email address(es):	
Home Address: <input type="checkbox"/> Same as Child or other:	

**Custody Arrangements (if applicable):**

Are there custody arrangements pertaining to legal right of access to the participant? YES NO

Are there any individuals prohibited from accessing/picking up the participant? YES NO

\*If yes to either question, please provide documentation.

**Emergency Contacts**

In case of an emergency, if a parent/guardian cannot be reached, the following individuals may be contacted and may be required to make a decision regarding the participant's welfare.

Please list in order of preference.

<i>Emergency Contact #1</i>	
Full Legal Name:	Relationship to Child:
Primary Phone:	Alternate Phone:
Home Address:	
<input type="checkbox"/> Authorized to pick up child	

<i>Emergency Contact #2</i>	
Full Legal Name:	Relationship to Child:
Primary Phone:	Alternate Phone:
Home Address:	
<input type="checkbox"/> Authorized to pick up child	

You may also authorize up to 2 other individuals to pick up your child:

Full name:	Phone:
Full name:	Phone:

Please note that government-issued ID will be needed if the pick-up person is not known to staff, and that Seedlings Forest School will not release a child to any unauthorized person, persons without suitable ID or anyone incapable of safely transporting a child.

### Health Information

Has the participant experienced or been diagnosed with any of the following:

<input type="checkbox"/> Asthma/respiratory condition	<input type="checkbox"/> Diabetes
<input type="checkbox"/> Bleeding disorder	<input type="checkbox"/> Epilepsy
<input type="checkbox"/> Concussion	<input type="checkbox"/> Heart conditions
<input type="checkbox"/> Hearing loss	<input type="checkbox"/> Vision Loss
<input type="checkbox"/> Recent major illness, operation or injuries:	
If yes, please provide further detail. This information will help us to plan for programming and emergency procedures.	

Allergies    NONE

<input type="checkbox"/> Food	<input type="checkbox"/> Medication	<input type="checkbox"/> Environmental (stings, pollen)	<input type="checkbox"/> Other:
Please describe the reaction and severity of the allergy below INCLUDING if an epi-pen is required:			

\*Participants must provide their own epi-pens.

### Immunization Records

Please **provide a copy** of the participant's immunization record to **Seedlings Forest School** prior to the first day of programming. You may provide a hard copy or a clear photo via email.

If you have chosen not to immunize, you must provide a statement of medical exemption form or a statement of conscious or religious belief form. These forms are available on the Ministry of Education's website.

### All About Me

Help us get to know your child! This information will help us to provide a safe and supportive environment so if there is anything you'd like to add that's not covered here, send us an email.

#### Toileting

- wears diapers/pull-ups      uses the washroom independently      requires assistance

Is there a specific word or behaviour your child uses to communicate toileting needs? If so, please elaborate:

What types of activities does your child do? These can be indoor/outdoor, organized or not.

What is your child's most positive quality?

Does your child tend to wander?

Is there anything else you would like us to know about your child to support their emotional well-being? This could include likes and dislikes, fears, or major changes like moving, a new sibling, recent death in the family – whatever you feel is important!

### Skin Product Consent

In the event that participants do not have their own skin products, **Seedlings Forest School** may apply the following to my child, in accordance with the manufacturer's instructions on the original container, when deemed necessary:

- Sunscreen (age-appropriate, non-aerosol, zinc-based formula)
- Hand Sanitizer
- Insect repellent (age-appropriate)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Media Consent

**Seedlings Forest School** will take photos and videos of participants to document and share their experiences with you, and we may also use those images for the following purposes:

- print material (posters, newspaper)
- promotional purposes (website, online news articles)
- social media (Facebook, Instagram)

We will never share names of participants or 'tag' you on social media. We try to only use back, side, or distant pictures of children to share online. You may change or revoke your consent at any point in time. Please note that photos that include children other than your own should not be shared on your personal social media out of respect for privacy issues.

If have any specific requests regarding image/video use, please let us know below. (i.e., no Facebook, or in the background of images only, etc)

**By signing, I consent to the use of images and videos of my child as described above.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Registration Policies

### Fee payment

- All programs require a non-refundable \$50 deposit to secure registration. The remainder of the fee must be paid before the first day of the session.
- Payments may be made by:
  - cash
  - cheque (made out to Steph Klein – Seedlings Forest School)
  - or e-transfer (send to [seedlingsforestschool@gmail.com](mailto:seedlingsforestschool@gmail.com))

### Cancellations/Refunds

- If a child must withdraw from the program due to illness or injury, the remaining program fee can be refunded with a doctor's note.
- Days missed due to vacation or illness cannot be refunded.
- In the case of emergency closure (due to facilitator illness or injury, or where we are required to evacuate our site) you will be fully refunded for the days missed.
- Extreme weather is a reality of participating in outdoor programming and it is not unexpected that we may need to cancel on days when the weather presents a significant hazard to participants. In the case of cancellation due to inclement weather, we can offer a 50% refund of the day's fees applied as a credit to future registration. We reserve the right to determine if weather conditions present a significant hazard and inclement weather can include but is not limited to:
  - temperatures below -20°C (including windchill) or above 30°C
  - high winds, freezing rain, thunderstorms
  - air quality warnings

### Waitlist

Registration for further sessions will be offered to participants currently attending Seedlings Forest School first, then to those on the waitlist, then any other inquiries.

**I confirm that the information I have provided is accurate. I understand that it is my responsibility to inform Seedlings Forest School of any changes to my child's information so that they may provide a safe and supportive program. I have read and understood the registration policies and am aware that this program is not licensed by the Government of Ontario.**

Participant's name: \_\_\_\_\_

Parent/Guardian name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## INFORMED CONSENT FORM

At **Seedlings Forest School** we support children in becoming confident, capable people who have a sound sense of their abilities and interests, and the ability to take age-appropriate responsibility for their own safety. For this reason, unstructured outdoor play and learning are central to this program/experience.

**Seedlings Forest School** takes reasonable steps to manage and balance risks, while at the same time allowing children to play freely. Program participants acknowledge its inherent risks of harm and personal injury. *While minor injuries like bruises, bumps and scrapes are not uncommon, serious injuries are rare, and life-changing injuries and fatalities are unlikely in the extreme. Still, as with almost any activity, indoors or outdoors, it is impossible to guarantee that they will not happen.*

### ACKNOWLEDGEMENT AND ASSUMPTION OF RISKS

1. I understand and acknowledge that by participating in the Seedlings Forest School program I recognize that activities may be physically demanding, and that risks and hazards may exist that include but are not limited to:

- Injuries from executing strenuous and demanding physical activities and that your child's risk of injury increases with fatigue
- Hazards associated with using tools like matches, ropes, tarps, mallets or natural objects like rocks and sticks
- Hazards resulting from the presence of harmful plants, natural loose parts, wild animals, insects including ticks, and changing weather conditions resulting in heat, cold, sunlight exposure, high winds, hail or lightning
- The possibility that your child may not heed safety instructions or directions given to the group or delivered individually
- Injuries arising from the actions of other children
- That all rules are designed to enhance the safety of your child and others and are to be followed at all times
- That fire and open-fire cooking require special instructions and training from the facilitator

2. Further, I agree to inform **Seedlings Forest School** in writing of any health, medical or other concerns that may impact the participant's ability to participate in the program.

### Consent to participate

Based on my understanding, acknowledgement, and consents herein, I agree that \_\_\_\_\_ (name of participant) has my permission to participate in the **Seedlings Forest School** program and that we have read and understood policies and procedures outlined in the parent handbook.

\_\_\_\_\_  
Participant's full name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's name (PRINT)

\_\_\_\_\_  
Parent/Guardian's signature