



MBBC Vacation Bible School

Join the Tour July 8th -12th 9am - Noon Grades K-6



Meadowvale Bible Baptist Church Home of the Mississauga Christian Academy 2720 Gananoque Drive, Mississauga, ON L5N 2R2 Phone: (905) 826-4114 • Fax: (905) 567-5874

REGISTRATION FORM



Camper Full Name:					☐ Male ☐ Female						
Date	of Birth: MM / D	D / YYYY	T-Shiı	rt Size (please circle)	: YS	YM	YL	AS	AM	AL	AXL
Parer	nt/ Guardian Name(s): _										
Addr	ess:			City:		P	osta	l Cod	le:		
	act Numbers: e: ()	Cell: (_))	Worl	k: (_)			
Emai	l:										
Plea	ise check all week	s that you a	re re	gistering for:							
	July 2 nd -5 th	= \$180.00		Before Care (\$30).00)			Afte	r Car	e (\$3	80.00)
	July 8 th – 12 th	= \$50.00 ME	BBC VI	BS program from	9:00	AM	to 1	2:00) PM	ONL	<u>Y</u> .
	July $8^{th} - 12^{th}$	= \$120.00*		Before Care (\$30).00)			Afte	r Car	e (\$3	80.00)
	July $15^{th} - 19^{th}$	= \$225.00		Before Care (\$30	0.00)			Afte	r Car	e (\$3	80.00)
	July 22 nd – 26 th	= \$225.00		Before Care (\$30).00)			Afte	r Car	e (\$3	80.00)
	July 29 th – Aug 2 nd	= \$225.00		Before Care (\$30).00)			Afte	r Car	e (\$3	80.00)
		MCA Summer C	amp ho	ours are <i>9:00 am to 4</i>	4:00 p	т.					

MBBC VBS hours are 9:00 am to 12:00 pm.

*During the week of VBS, Summer Camp will be available from 12:00 pm to 4:00 pm.

Before-Care is available from 7:00 am – 9:00 am, and After-Care is available from 4:00 pm – 6:00 pm.

Registration is subject to space availability. Camp spaces are limited.

MCA Summer Camp is for children ages 4 to 12 years, and they must have completed Junior Kindergarten to register.

PAYMENT FORM



A completed camp registration form and full payment of the camps fees is required to complete the camp registration process.

Registration forms can be submitted to the Main Office by email at: <u>mcaoffice@mcalearn.com</u> or in-person. Office hours are 9:00 am – 4:00 pm, Monday to Friday. Accepted methods of payment are as follows: E-transfer, Cash, Cheque, Debit, Visa, and MasterCard.

E-transfers can be sent to: <u>e-transfer@mcalearn.com</u>. Cheque(s) can be made payable to MCA.

Please note: Registration is subject to space availability. Camp spaces are limited.

REFUND and WITHDRAWAL POLICY: Withdrawal for campers must be submitted no later than <u>7 days</u> before the beginning of each week of camp. <u>For example</u>: Requested week of withdrawal: July $15^{th} - 26^{th}$; withdrawal notice due on or earlier than: **Monday**, July 8th.

*Note: No refund will be given to any withdrawal requests received <u>less than 7 days in advance</u>. There will be no refunds for VBS.

I understand the refund and withdrawal policy and hereby give permission for the above child to participate in all camp activities and to receive emergency medical treatment if necessary. I release Mississauga Christian Academy and all camp staff and volunteers from liability.

All personal information collected and retained is for internal purposes only, except for the requirement to share information as required by the laws of the Region of Peel, the Province of Ontario and the Government of Canada. Personal information will not be sold, rented, or lent to any person or other organization for commercial purposes. Personal information will be maintained indefinitely as it is a requirement of our insurance company and legal counsel.

Parent/Guardian Name (Pr								
Parent/Guardian Signature	2:		Date:	MM /	DD	/ YYYY		
OFFICE USE ONLY								
APPLICATION RECEIVED:	MM / DD / YYYY	RECEIVED BY:						
PAYMENT								
	DATE RECEIVED:	MM / DD /	YYYY					
	AMOUNT RECEIVED: \$_							
	PAYMENT METHOD:	E-TRANSFER 🗆 CH	HEQUE					
	E	DEBIT DVISA		RCARD				

MEDICAL FORM



Camper Name:		🗆 Male	Female								
Date of Birth: MM / DD / YYYY	Health Card	#:									
Family Doctor: Family Doctor Phone Number:											
EMERGENCY CONTACT INFO:											
Name:	Relationship to Camper:										
Contact Numbers: Home: ()	Cell: ()		Work: ()								
ADDITIONAL AUTHORIZED PICK-UP:											
MEDICAL INFO:											
Please list any allergies that your child may hav	/e:										
Does this cause ANAPHYLACTIC SHOCK (please	e circle one):										
YES (<u>If YES, a separate form will ne</u>	eed to be completed)		NO								
Please list any medications that your child is cu Important Note: If your child requires medication whi guardian to administer the medicine throughout the c assisting campers to administer their prescribed emer	ile at camp, we ask that y day. Camp leaders will not	vou make pr t administer	any medicine of any type (apart from								
Please list any health conditions camp staff nee	ed to be aware of:										
Does your child have any physical, mental, em aware of? (please circle one): YES	notional, behavioural o NO	concerns o	r limitations that staff should be								
If yes, please describe?											
DISCLAIMER:											

I am the legal guardian of the camper with full authority to make decisions with respect to the care, upbringing, and education of the applicant. I agree and comply that all the medical information provided on this form is true and accurate – lacking nothing. I hereby release my child to the care and medical discretion of the staff at Mississauga Christian Academy and camp volunteers. In the event of an emergency and that no one can be immediately contacted, my child will be taken to the hospital or a physician to be treated if deemed necessary by one of the camp staff, church staff or volunteers. I hereby authorize the physician and nursing staff to undertake examination, investigation, and necessary treatment of my child.

Parent/Guardian Signature____

CONSENT FORM



AMBULANCE

I hereby give permission for an ambulance to be called in case of an emergency, understanding that I must meet the ambulance at the hospital in order for treatment to proceed.

Parent/Guardian Signature	Date:	MM /	DD	/ ΥΥΥΥ
PHOTO/VIDEO				
(Print Name of Parent/Guardian)				
Give Permission				
Do not give permission				

Mississauga Christian Academy to use photographs and / or videos taken of my child, ____, during the MCA Summer program for fundraising and promotional purposes. This might include (but is not limited to), the right to use them in printed and online publicity, social media, press releases and funding applications.

Parent/Guardian Signature	Date:	MM /	DD	/ `	YYYY	
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AREA WALKS, FIELD TRIPS & PROGRAM ACTIVITIES

Campers attending the MCA Summer Camp program will be participating in off-campus activities throughout the week. Campers will be required to walk to locations within reasonable walking distance (a maximum of 1.5 Km to reach the location). For trips that are not within walking distance, campers will be required to ride on a licensed passenger vehicle under the supervision of designated camp leaders. Please note: Field Trips & excursions are subject to availability and restrictions.

_____ give permission for my child ______ (Print Name of Parent/Guardian) (Print Name of Camper)

to leave campus during camp hours. I understand that campers will be required to walk to off-campus locations of 1.5 KM or closer or will otherwise ride a licensed passenger vehicle for trips with a greater distance than 1.5 KM.

*Please note that if you do not wish for your child to attend off-campus trips, they will need to remain home on trip days.

Parent/Guardian Signature

L

Date: MM / DD / YYYY



Calling all campers! We are excited to have you join us for summer camp and VBS this year as we enjoy the Summer, Experience fun activities and trips, educate our students, and deepen our relationship with Jesus. Camp will begin each morning at 9:00 am and will end at 4:00 pm. During the second week, where VBS takes place, VBS will be from 9:00 am until 12:00 pm, followed by regular summer camp from 12:00 pm to 4:00 pm. A more detailed schedule will be sent out closer to the beginning of camp.

We understand that for some of us, the day begins a little earlier, and for others, the day ends a bit later. To accommodate for this, Before-Care is available from 7:00 am to 9:00 am, and After-Care is available from 4:00 pm – 6:00 pm. If you should need any of these extra services, please be sure to indicate that on your registration form and include it with your camp fee payment.

What to bring:

- 1 Lunch and 2 snacks
 - Each camper should bring 1 healthy snack (e.g., fruit, veggies, yogurt, etc.) and another snack of their choice.
 - Lunch and snacks will not be provided by MCA (*Disposable lunches are required for trip days*)
- Sunscreen
- Hat
- Comfortable running/walking shoes
- Reusable water bottle
- Extra pair of clothing

Here are a few house rules:

- Be respectful of all peers, camp staff and MBBC/MCA property
- Please do not bring any food items containing NUTS or PEANUTS
- No sharing snacks/food (due to allergy risks)
- Please arrive on campus 15 minutes prior to departure time for all trip days, as the bus <u>must</u> leave on time!

IMPORTANT NOTE: If you arrive with your child after the bus has departed, you must make the necessary transportation arrangements for your child to get to the trip location.

Looking forward to seeing you at camp!

Sincerely,

Mississauga Christian Academy & Meadowvale Bible Baptist Church