Youth Firefighting Adventure Camp!

Are you interested in learning about firefighting?
Are you 13 – 16 years of age?
Are you willing to experience new and exciting things?
While learning at the same time?

If you answered **YES** to these questions come join the Drayton Valley/Brazeau County Fire Services for a week of:

Youth Firefighting Adventure Camp!
August 3rd & 4th, Drayton Valley

FIREFIGHTER CAMP is 2 days of experiencing and learning all about the job of a firefighter. From the basics about the tools and equipment we use to live fire training exercises and everything in between.

Hours: August 3rd & 4th Wednesday and Thursday 9:00am – 3:00pm

Campers can be dropped off at the firehall between 15 minutes prior to start of camp day and **must be picked up no later than 30 minutes after the end of camp day.**

To Apply:
Registration Fee is **ONLY** $50.00 per camper to cover cost of t-shirt, water bottle and snacks **(Payment secures your spot).**
Application forms can be picked up at:

Drayton/Valley Brazeau County Fire Services
Box 6685, 5120-52nds Street
Drayton Valley, AB
T7A 1S1

Or Visit our website @ www.dvffa.com

Application Deadline is July 8th, 2016 at 5:00 PM.
There is limited space available, so don't delay in submitting your application.
For More Information Call: (780) 514-2216

Youth Firefighter Adventure Camp

Child's Name: _____ Birthdate: _____ Age as of July 1st_____

Child's School: _____ Male/Female (please circle)

Child's home address: _____, Town_____, Postal Code: _____

Phone Number: _____ Parent/Guardian _____ Parent/Guardian_____
(Cell) (Work)

Alberta Health Care # _____T-Shirt Size _____youth sizes S – XL, Adult S – XXL

Parent/Guardian Names: _____

Physician Name: _____ Phone: _____

Alternate Emergency Contact: _____ Relation to Child: _____
Daytime Phone Number for Alternate Emergency Contact: _____

Does your child have any food or other allergies/medical conditions? YES NO (circle one)

If yes, please describe: _____

Transportation (please "check" one of the following):

_____My Child has permission to walk home

_____ I (or individual listed below) will pick my child up from the day camp program.

Names of those who may pick up my child:
Name: _____ Phone: _____

Name: _____ Phone: _____

By initialing in the box next to the following statements and signing this registration form:	
	I authorize the Town of Drayton Valley, Brazeau County and the Drayton Valley/Brazeau County Fire Services and their employees to take pictures or video of my child during the Youth Firefighting Adventure Camp and further authorize the use of the pictures of video in promotion of future camps.
	I give my child permission to participate in activities, field trips, and off site excursions that are part of the Youth Firefighting Adventure Camp schedule during programming time while accompanied by Fire Service Staff.

By signing below, I give my child permission to participate in the Drayton Valley/Brazeau County Fire Services Youth Firefighting Adventure Camp. I understand I will be notified in the event of an emergency and give permission to the Fire Services staff, with current Fire Aid Certification, to administer and/or obtain medical treatment for my child. I release all staff and/or volunteers of any and all claims due to injury or loss incurred while participating in the Kids Fire Camp.

Parent/Guardian Name (Printed): _____

Parent/Guardian Signature: _____ Date: _____

This personal information is being collected under the authority of the Municipal Government Act and the Freedom of Information and Protection of Privacy Act, s.33(c). This information will be used for the purpose of running the Youth Firefighting Adventure Camp and in the case of any emergency's that may arise. Collected personal information is protected from unauthorized access, collection, use and disclosure in accordance with the FOIP Act and can be reviewed or corrected on request. Questions regarding the collection of personal information can be directed to:

Tom Thomson
Fire Chief
Drayton Valley/Brazeau County
Fire Services

Box 6685, 5120-52nd St.
Drayton Valley, AB
T7A 1S1

(780) 514-2216

The following application must be received by the outlined application <u>deadline July 8th, 2016 at 5:00 PM</u> to the Drayton Valley/ Brazeau County Fire Services, Station 3 office.
You can mail the application form to:

Drayton Valley/Brazeau County Fire Services
Box 6685
Drayton Valley, AB
T7A 1S1

Or

Fax: (780) 514-2244

Youth Firefighting Adventure Camp

I, _____ (Name of Parent/guardian) consent, Allow and hereby authorize _____ (Name of Participant, hereinafter referred to as the "My Child") to participate in the Drayton Valley/Brazeau County Fire Services Youth Firefighting Adventure Camp (hereinafter referred to as the "Camp").

	By initialing the box beside this statement, I also consent, allow and hereby authorize My Child to participate in activities during programming time at the Drayton Valley/ Brazeau County Fire Services Youth Firefighting Adventure Camp that may require My Child to leave the

I recognize and acknowledge that there is risk and potential danger to and for My Child associated with his or her participation in the Camp.

I, on behalf of myself and My Child, hereby waive the right to hold the Town of Drayton Valley and Brazeau County, or any of their departments, including the Drayton Valley/Brazeau County Fire Services Department, or their successors, assigns, servants, agents, employees, contractors, officers, elected officials, or volunteers **responsible or financially accountable** for any consequences arising from the participation of My Child in the Camp, or any acts or actions arising therefrom or related thereto.

Further, on behalf of myself and My Child, I hereby release, indemnify and hold harmless the Town of Drayton Valley and Brazeau County including the Drayton Valley/Brazeau County Fire Services Department, or their successors, assigns, servants, agents, employees, contractors, officers, elected officials, or volunteers from and against all claims, actions, costs, expenses, damages, demands, or proceedings in respect of the death, personal injury, loss, or damage to My Child, My Child's estate, or myself, howsoever caused, arising out of or in connection with the Program, My Child's participation in the Camp, or My Child's actions or inactions, notwithstanding that the same may have been contributed to or occasioned by the negligence of the Town of Drayton Valley, Brazeau County, Drayton Valley/Brazeau County Fire Services Department or their successors, assigns, servants, agents, employees, contractors, officers, elected officials, or volunteers.

In witness whereof, I confirm I have read the above consent, waiver, release and indemnification and have voluntarily executed the same this _____day of _____, 2016_____.

_____ _____

Witness Parent/Guardian of Minor

_____

Print Name: