

Sooke & Electoral Area Parks and Recreation Commission

> OFFICE LOCATION: SEAPARC Leisure Complex 2168 Phillips Road Sooke, BC

MAILING ADDRESS: PO Box 421 Sooke, BC V9Z 1H4

TELEPHONE: 250-642-8000

FAX: 250-642-4710

EMAIL: seaparc@crd.bc.ca

WEBSITE: www.seaparc.ca

## SEAPARC Parental Permission for Child Sign In & Out

It is SEAPARC Policy that children may not leave programs until signed out by a parent, legal guardian, authorized adult on file, or themselves if they are ten (10) years of age or older and permission has been granted by their parent or legal guardian. If your child is ten (10) years of age or older and you wish to grant them permission to sign themselves in & and out, please read and complete the following:

l,		give pe	ermission to			
	(Parent/Guardian)			(child's name)		
born _		to sign themselves	in & out of		Camp.	
	(mm/dd/yyyy)					
My chi	ild will be attend	ling this camp from _		to	, 20	
			(dates re	egistered in camp	))	
They h	ave permission t	0:				
	Walk Home	□ Yes □ No				
	Bike Home	□ Yes □ No				
	Bus Home	□ Yes □ No				
	Stay & Swim	□ Yes □ No				
registr progra	ation receipt and m end time. I ac	in and sign-out take pl I that my child will onl knowledge that once i vill no longer be respo	y be permit my child has	ted to leave at th signed out of the	e pre-determined e program that	
Daytim	ne phone numbe	r:				
Signati	ure:					
Date:_						

The personal information contained on this form is collected in accordance with the Freedom of Information and Protection of Privacy Act and will only be used for the purpose for which it was collected.