BARNHARTVALE WAITLIST FORM



Personal Information and Confidentiality: Your personal information is collected for (1) registration purposes to ensure that we provide a safe and supportive environment for your child, and (2) for completing demographic and statistic reports for our funders. We respect the privacy of all our members. The information you provide is confidential and will not be shared without your written permission. To learn more about our privacy policy, please visit www.bgckamloops.com or speak to a member of our administration team. If you have any questions or concerns about this form, we're happy to help. **Please email the completed form to** children@bgckamloops.com

PROGRAM REQUEST FOR BARNHARTVALE (RLC CLUB LOCATION)

Preferred Start Date:			
Do any of your other children already attend the Club?	Yes	No	Not Applicable

CHILD INFORMATION

Last Name:	First Name:	Middle Name:	
Address:		City:	Postal Code:
Date of Birth (month/day/year): _		School attending:	Grade:
Best Phone Number(s) To Reach Y	ou At:		
Email Address:			
Preferred Method of Contact: Pho			

MEDICAL INFORMATION

BGC Kamloops is a safe and inclusive place for all children and youth. Please complete the following information so we can better support the health and safety of your child.

Does your child have any health, physical limitations, or special considerations that our staff team should be aware of (e.g., behavioural concerns, injuries, emotional sensitivities, disabilities, recent loss, seizures, food allergies, vegetarian, etc.)? Yes No If yes, please explain:

SIGNATURES

Name of Parent/Legal Guardian (please print):
Signature of Parent/Legal Guardian:
Date of Signature:

COMMUNICATION LOG (OFFICE USE ONLY)

Date of Contact	Time	Message	Outcome

Date removed from waitlist: _____

Reason: _____

Staff Signature: _____

Date of Signature: _____