



202, 5000 GAETZ AVENUE, RED DEER, ALBERTA T4N 6C2
www.immigrant-centre.ca

Telephone (403) 346-8818 Fax (403) 347-5220



SNAP Immigrant Youth Program

Summer 2019 Registration Information

Grades 6-12

Student Information:

First Name: _____ Last Name: _____

Date of Birth: _____ Gender: Female Male

Country of Birth: _____ Languages Spoken: _____

Date of Arrival to Canada: _____ **Permanent Resident #** _____

Alberta Health Care #: _____ Phone #: _____

Address: _____ **Postal Code:** _____

School attending: _____ Grade (going into): _____

Does the student have any allergies? (Yes) (No) Details: _____

Please provide details about any medical conditions or health concerns (i.e. asthma, recent surgeries)

Parent/ Guardian Information:

#1 Parent / Guardian Name: _____

Parent Date of Birth (month/day/year): _____

Parent Email Address: _____

Home Phone #: _____ Cell Phone #: _____

#2 Parent / Guardian Name: _____

Home Phone #: _____ Cell Phone #: _____

Our office is fragrance free. Thank you for not wearing scented products when visiting our office.

Central Alberta Refugee Effort (C.A.R.E.) Committee thankfully acknowledges support and funding assistance from: Immigration, Refugees and Citizenship Canada, Alberta Government, Red Deer & District Family and Community Support Services, Life Long Learning Council of Red Deer, United Way of Central Alberta, and RBC Foundation.



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Grades 6-12 Price Breakdown

What your kid will be doing this Summer!	Non- Qualifiers for Federal Subsidy (2 nd generation, Foreign Worker, Intl. Student etc.)	Permanent Resident (Refugee/Immigrant 3 years +)	Permanent Resident (Refugee/Immigrant Less than 3 years)
* Rec & Bus pass ALL Summer, activities with SNAP including Discovery Canyon, Gull Lake day, Red Deer Museum, Sports Hall of Fame, Gymnastics, Collicutt, Rec Center, Dawe Center and more!	\$130	\$60	\$35
* Westerner Days. Includes admission and unlimited rides! July 18th	<input type="checkbox"/> \$36	<input type="checkbox"/> \$10	<input type="checkbox"/> \$5
* Lacombe Corn Maze July 25	<input type="checkbox"/> \$20	<input type="checkbox"/> \$10	<input type="checkbox"/> \$5
* Calgary Zoo, Aug 1	<input type="checkbox"/> \$25	<input type="checkbox"/> \$10	<input type="checkbox"/> \$5
Total	\$211 (No Sibling rate)	\$90 (No Sibling rate)	\$50 (No Sibling rate)

*** If you are experiencing financial difficulties, please contact us.**

Consent for Participation

I give permission for my child/ward to participate in activities with Central Alberta Refugee Effort's (C.A.R.E.) Immigrant Youth Program. I understand that for some events, travelling by public transportation or in the vehicle of a C.A.R.E. staff or volunteer will be required and I give my permission to travel in these ways.

I understand that I cannot sue C.A.R.E. for any losses or injuries to my child/ward. C.A.R.E., its staff and volunteers are not responsible for any loss, damage, or injury to anyone participating in the program.

I agree to let my child/ward participate in the program and I agree to accept ALL risks.

I have read this consent form and understand and accept its terms.

Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____ Date: _____

Consent for Photograph Release

I hereby grant Central Alberta Refugee Effort (C.A.R.E.) Committee the right to make unlimited use of photograph(s) and video footage taken of my child/ward during C.A.R.E. events. I understand that the video and photograph(s) may be used for publicity and promotional purposes, including, but not limited to, printed publications (newsletters, brochures, etc.), websites, social media channels (Facebook, etc.), displays, and exhibits.

I understand that I do not own the copyright of the video(s) and photograph(s) and I waive all rights to inspect or approve the final use of the video(s) and photograph(s).

I will not sue C.A.R.E. for any reason whatsoever that results from using the video(s) and photograph(s) of my child/ward for these purposes.

I have read this consent form and understand and accept its terms.

Name of Parent/Guardian: _____

Signature of Parent or Guardian: _____ Date: _____

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