

Art Camp 2020

Before Camp begins

All forms completed, signed and returned
COVID-19 Agreement
Participant Waiver
Media Release
Camper info sheet

During Camp

Monitor health and report any changes immediately
Contactless drop off and pick up each day (In pouring rain, please dress artists for the weather, complete with umbrella)
Follow guidelines agreed to on COVID-19 Agreement

Packing list

Each day camper should have

- Bathing suit, towel, sunscreen (please put on at home), hat
- Yoga mat if possible
- Old shirt for painting smock
- Footwear – running shoes and flip flops or sandals
- Warm layers if cold out
- Rain jacket and umbrella if wet out
- Snacks, water bottle and lunch (100% peanut free)
- QT activity (quiet time after lunch is for individual reading/drawing/writing etc.)
- Reminder -we always insist on no devices during camp

Directions:

As the location is remote and GPS can struggle with the exact location, please use the ROOST Wine Company on the 10th Line as we are .3km south of there. The farm address is 415719 10th Line, Clarksburg. My cell 416 662 0047 Please go over best practices, expectations and protocol with your child.

Looking forward to a great week together. Follow us on IG @artstudioforchildren to see the fun we are having and the magic we are making.

Nancy
416-662-0047
art studio for children

PARTICIPANT WAIVER | Art Studio For Children (ASFC) Art Camp

(RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT)

In consideration of participating in ASFC Art Camp, I/my minor child or ward, (print name of participant legibly) _____, represent(s) that I understand the active nature of camp. I fully understand that this type of event involves risks of injury and serious bodily injury, including permanent disability, paralysis and death, which may be caused by my minor child or ward's own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releases" named below; and that there may be other risks either not known to me/my minor child or ward or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I/my minor child or ward may incur as a result of my/my minor child or ward's participation in the event, except for losses, costs and damages that are the result of the gross negligence of others. I hereby release, discharge, and covenant not to sue ASFC, Nancy Macdonald, their administrators, directors, agents, officers, volunteers, approved drivers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the event takes place or utilizes, from all liability, claims, demands, losses, or damages on my account, except for any liability, claims, demands, losses, or damages caused by gross negligence. I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I/my Parent/Legal Guardian have/has given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that, if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Signature of Parent/Legal guardian: _____ Date: _____

Advertising and Promotion

ASFC and Nancy Macdonald, have my permission, (both during and any time after), to use my (or my minor child/ward's) likeness, voice or words in either television, radio, film, newspapers, magazines, and other media, and in any form, for the purpose of advertising or communicating the purposes and activities of ASFC, and/or applying for funds to support these purposes and activities, I further waive any current or future right to seek compensation for said use.

Printed name of participant _____ Age: _____

Signature of Parent/Legal Guardian: _____ Date: _____

Personal Information

Camper Name: _____

Parent/Guardian E-mail: _____

Parent/Guardian Phone: _____

Emergency Contact #1 name/number- _____

Emergency Contact #2 name/number- _____

Medical Information

O.H.I.P. # _____

Last Tetanus: _____

Doctors name: _____ Phone: _____

List any chronic disability or illness: _____

List any allergies (food, drug, environmental, etc.) and their severity. Please explain the measures we need to take in case of reaction:

Describe any other physical, social, medical or emotional conditions that may prevent you from participating fully in the programme _____

What medication is your child currently taking?: _____

In the event that I cannot be reached in an emergency, I hereby give permission to the physician in attendance to hospitalize secure proper treatment for, and to order injection, anesthesia or surgery for my child/ward as named above.

Parent/Guardian signature: _____

Parent/Guardian printed: _____

Date _____

COVID-19 Protocol

To protect children and staff, we are utilizing multiple measures to maximize health and safety at camp consistent with government guidelines, which may be found at www.health.gov.on.ca:

- **Physical distancing of children at camp**
 - We will have one cohort per camp – a maximum of 8 campers and two staff total.
 - Utilizing pieces of equipment and/or barriers to support physical separation and to define specific spaces for individual campers and classes.
 - Signage and communication at camp regarding social distancing, provision of supplies for hand hygiene and respiratory etiquette.
 - No non-essential visitors allowed.
 - We request that you practice physical distance and single pod behavior 14 days prior to camp session and during your child's week at camp.
- **Personal Protective Equipment as recommended by health authorities**
 - Our ultimate goal is to provide safe and healthy camps and still allow staff to have a positive engagement with campers. We will be following summer camp guidelines with regards to the use of PPE (face coverings, in particular).
 - We will ask that a personal, comfortable, face covering be brought to camp for the child.
 - Instructors will be outfitted with masks and face guards
- **Enhanced hand washing protocols & facility cleaning**
 - Hand sanitizer – will be available to all instructors and campers.
 - Washing of hands will be required before any snack or meal breaks and as a normal part of any bathroom breaks.
- **Adjustments to our use of equipment to limit cross-contact**
 - Regular cleaning of high-touch surfaces.
 - Sharing of equipment between campers and classes will be kept to a minimum, any used equipment will be cleaned and sanitized after each camp day.
- **Health checks for campers & staff**
 - Daily health screen for every camper/family.
 - Daily health screen for staff.
 - Stay-at-home if feeling ill or exhibiting any symptoms.
- **Contactless sign-in and sign-out procedures**
 - Designated areas for each child/parent at end of driveway.
 - Parents will also be expected to abide by local guidelines during drop off and pick up regarding the use of PPE and / or social distance of 6 metres.
- **Strict "no sharing" policies for food & personal items**

I understand the above and agree to reinforcing this at home and with my child. I agree that amongst the risks at camp, one of which is, albeit remote, that they could be exposed to COVID-19. In that event, I would not hold ASFC or any persons at camp liable.

Signature of parent/guardian: _____ Date _____