



# Sing Fai Children Choir Program Participant Enrolment Form

Organized by Sing Fai Sports Club—a non-profit organization since 1987 & sponsored by Lucliff Company Limited & Sing Tao Newspapers

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## INFORMATION ABOUT SING FAI CHILDREN CHOIR

**Age group:** From 5 to 12 years of age.

**Location for weekly Sunday meeting:** Lanstaff Community Centre, 155, Red Maple Road, Richmond Hill, Ont. L4B 4P9

**Date:** Starting each Sunday from September 12, 2010 from 7:00PM to 8:30PM To June 26, 2011

**Instructors:** Mr. & Mrs. Sunny Chan

**Cost:** \$25.00 per Month

Please fill this application together with your cheque and mail to Sing Fai Sports Club at above address.

### PARTICIPANT INFORMATION:

New Member

Returning Member

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Nickname: \_\_\_\_\_ Gender:  Male  Female Date of Birth (d/m/yy): \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Home Ph. #: \_\_\_\_\_ Other Ph. #: \_\_\_\_\_

Provincial Health Care Number: \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION:

Parent(s)/Guardian(s) Name: \_\_\_\_\_ Email: \_\_\_\_\_

Parent/Guardian: Daytime Ph. #: \_\_\_\_\_ Home Ph. #: \_\_\_\_\_ Other Ph. #: \_\_\_\_\_

### ALTERNATE EMERGENCY CONTACT INFORMATION:

*(names in addition to parents/guardians above)*

Name of Contact: \_\_\_\_\_ Daytime Ph. #: \_\_\_\_\_ Home Ph. #: \_\_\_\_\_

Other Ph. #: \_\_\_\_\_ Relationship to youth: \_\_\_\_\_

Permission to pick youth up from meeting/activity?  Yes  No

### INFORMATION FOR MEDICAL EMERGENCIES:

Physician's Name: \_\_\_\_\_ Physician's Phone #: \_\_\_\_\_

Insurance Coverage Held: Yes  No

Does the participant have any allergies? Yes  No  If yes please provide details below: \_\_\_\_\_

Please advise of any medical conditions, diseases, operations, disorders or problems the member has had or currently has. Provide details below: \_\_\_\_\_

Does the participant require special care, medication, or diet? Yes  No

Please provide details: \_\_\_\_\_

Date of last tetanus shot (Month and Year): \_\_\_\_\_

### CONSENT TO PARTICIPATE

I understand that participation in Sing Fai Children Choir is voluntary, and involves a certain degree of risk when participating in some outdoor performance activities. After carefully considering the risks involved, and having full confidence that reasonable precautions will be taken to ensure the safety and well-being of my son/daughter/ward, I grant permission for my son/daughter/ward to become a member of Sing Fai Children Choir and to participate fully in its activities.

### RELEASE, WAIVER AND INDEMNITY

In consideration of the acceptance of my daughter/son/ward the permission to participate in the Sing Fai Children Choir, I, for myself as parent or guardian, my heirs, executors, administrators, successors and assigns hereby release, waiver and forever discharge Officers, Staffs and volunteers of Sing Fai Sports Club and Sing Fai Children Choir from all claims, demands, damages, cost, expenses, actions and causes of action, whether in law or equity, in respect of death, injury, loss or damage to my person/my daughter, my son, or my ward arising or to arise by reason of our participation in the said event. Notwithstanding that same may have been contributed to or occasioned by the negligence of any of the aforesaid.

I further hereby undertake to hold and save harmless and agree to indemnify all of the aforesaid from and against any and all liability incurred by any of all of them arising as a result of, or in any way connected with my daughter/son/ward in the said event.

I acknowledge and agree that Sing Fai Sports Club may use photographs and videos of the performance events and the participants therein for promotional purposes.

By submitting this application, I acknowledge having read, understood and agreed to the above waiver, release and indemnity.

(All information provided will be conformed with the Canadian Private Acts)

Signature (Parent or Guardian)

Date (dd/mm/yyyy)