

SUPER COOL AFTER SCHOOL



The Calgary Chinese Community Service Association (CCCSA) in collaboration with Calgary After School from City of Calgary is offering an after-school tutorial program. This program offers a fun learning opportunity for your child(ren). Experienced after-school coordinators from CCCSA, leaders from the community, and trusted volunteers will staff this program.

Start Date: September 28th, 2015 to June 17th 2016

With the following breaks in correspondence to CBE traditional calendar.

Days we off:

Sept 25th, Oct 12th & 30th, Nov 11th, & 20th, Dec 04th,

December 18th-January 04th, 2016 (1st session resumes Jan 05th)

February 11th & 12th (Teachers Convention)

March 17-29th (Spring Break)

April 22nd & 25th

May 20th & 23rd

When: Monday to Fridays; Mon, Wed & Fri (Elementary Students)

(3:45pm-5:45pm) Tues, Thurs & Fri (Junior/Senior High Students)

Location: 1, 128-2nd Avenue S.W. CCCSA Office in Chinatown

*****Please take note that we are moving, and will be in a new location in January 2016*****

If you have any questions feel free to contact Olivia

Direct line: 403-767-3086 Email: olivia.dam@cccsa.ca

Kind Regards,

Olivia Dam Children/Youth Program Coordinator, CCCSA

Keith Ong Children/Youth Program Coordinator, CCCSA

Child's Information

Name _____

Grade _____ Gender _____ Age _____

Date of Birth _____ MM/DD/YYYY

Medical attention (Allergies, Disabilities, Medication, etc):

Legal Guardian Information

Name; _____ Relation to Child _____

Address: _____

Postal Code: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

Email: _____

Emergency Contact (If different from above)

Name: _____ Relation to child _____

Phone: _____

Pick up Information

NOTE: Parents are responsible for arranging all transportation as buses *will not* be available.

My Child will be picked up by (name) _____.

My Child will be allowed to walk home. (initial) _____

Parental Consent and Waiver Form

To be completed and returned by the parent/legal guardian of all participants taking part in activities with the Calgary Chinese Community Service Association.

Program: Supercool After School

I agree to my daughter/son (*Printed Name/Child*), _____ taking part in the above mentioned program. I understand that there are inherent risks in the variety of activities in which my child will participate during the CCCSA summer camp. By signing this waiver, I waive my right to any and all claims that I may have against the CCCSA, their staff and representatives for any injuries or of an emergency and I cannot be reached, permission hereby granted to the CCCSA to secure medical treatment for my child. I give my permission for any emergency physician to treat the person named above. I accept for all medical expenses incurred.

Signature Date (DD/MM/YYYY):

Printed name of Parent/Guardian: _____

Signature: _____

Photo Release Waiver

I grant the CCCSA Supercool After School permission to use, for promotional purposes, photographs taken during the program.

Personal information of this form is collected under the authority of the Freedom of Information and Protection of Privacy Act, Section 33(C) RSA 2000. If you have any question regarding the collection or usage of this information, please contact Olivia Dam.

Child's name _____ Parent's name _____

Date: _____ Signature: _____