



SUMMER CAMP 2024

Pre-registration Period: 9:00am, Mar 27 - 5:00pm, Mar 31, 2024.

The pre-registration Form will be only accepted by email at contact@jlc victoria.com.

STUDENT

Full Name:

Date of Birth (MM/DD/YYYY)

PROGRAM SELECTION

Mark "X" as many as you would like to apply for.

DATE	PROGRAM	TIME	FEE	Selection (X)
Week 1	NO CLASS			
Week 2	July 8-12 Preschool	Full Day	9:00 am - 3:00 pm	\$120.00 (with CCFRI)
		Half Day*	9:00 am - 12:00 pm	\$118.00 (with CCFRI)
Week 3	July 15-19 School Age	Full Day	9:00 am - 3:00 pm	\$210.00**
Week 4	July 22-26 Preschool	Full Day	9:00 am - 3:00 pm	\$120.00 (with CCFRI)
		Half Day*	9:00 am - 12:00 pm	\$118.00 (with CCFRI)
Week 5	July 29-Aug 2 School Age	Full Day	9:00 am - 3:00 pm	\$210.00**
Week 6	NO CLASS			
Week 7	August 12-16 School Age	Full Day	9:00 am - 3:00 pm	\$210.00
Week 8	August 19-23 Preschool	Full Day	9:00 am - 3:00 pm	\$120.00 (with CCFRI)
		Half Day*	9:00 am - 12:00 pm	\$118.00 (with CCFRI)
Week 9	August 21-25 School Age	Full Day	9:00 am - 3:00 pm	\$210.00**

* The full-day students will have a priority over the half day students for the registration.

The **School Age program is supposed to be eligible for **CCFRI** and the **parent fee could be lower**. The deduction amount will depend on the age. When we receive the funding from the government, the difference will be refunded.

APPLICANT (GUARDIAN)

Full Name:

- ✓ All information I provided for JLC Victoria for the 2022/23 program including;
Family Information, Medical Information, Medical Authorization, Emergency Contacts, Authorized Pick-Up Persons, Photography Permission, and Immunization Information
 are all the same for this child. *(If the information needs to be updated for the summer camp, please submit the summer camp registration form.)*

Signature of Parent/Guardian:

Date:



WAIVERS AND INFORMED CONSENT

I, as parent/guardian of _____ (“Child”), hereby assume all risks and hazards incidental to the conduct of the activities at JLC Victoria (Operated by Japanese Language Consultant Inc.) My Child is fit for the program(s) in which I have enrolled him/her. I HERELY RELEASE AND SHALL DEFEND, INDEMNIFY AND HOLD HARMLESS RELEASEES FROM EVERY CLAIM AND ANY LIABILITY THAT I OR MY CHILD MAY ALLEGE AGAINST RELEASEES (including reasonable legal fees and costs) AS A DIRECT OR INDIRECT RESULT OF INJURY OR DEATH TO ME OR MY CHILD BECAUSE OF MY CHILD’S PARTITIPATION IN ANY JLC VISTORIA PROGRAM(S) , WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERS TO THE MAXIMUM EXTENT PERMITTED BY LAW. I PROMISE NOT TO SUE RELEASEES ON MY BEHALF OR ON BEHALF OF MY CHILD REGARDING ANY CLAIM ARISING FROM OR RELATED TO MY CHILD’S PARTICIPATION IN ANY JLC VISTORIA PROGRAM(S).

I ACKNOWLEDGE THAT, BY SIGNING THIS DOCUMENT, I AM RELEASING JAPANESE LAGUAGE CONSULTANTS INC. AND THEIR REPRESENTATIVES, EMPLOYEES AND VOLUNTEERS FROM LIABILITY, AND THAT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS. THIS SIGN UP AND RELEASE FORM IS A CONTRACT WITH LEGAL AND BINDING CONSEQUENCES AND IT APPLIES TO ALL ACTIVITIES IN WHICH MY CHILD ENGAGES DURING JLC VICTORIA PROGRAM(S), OPERATED BY JAPANESE LANGUAGE CONSULTANTS INC., REGARDLESS OF WHETHER SUCH ACTIVITY IS A PART OF A FORMAL PROGRAM. I HAVE READ THIS RELEASE CAREFULLY BEFORE SIGNING. I UNDERSTAND WHAT THIS RELEASE MEANS AND WHAT I AM AGREEING TO BY SIGNING.

I understand that no insurance coverage for participants in these activities is provided by the JAPANESE LANGUAGE CONSULTANTS INC. By registering for this program, I understand and agree that if a portion of the program is unable to be completed due to unforeseen circumstances under responsibility of the JAPANESE LANGUAGE CONSULTANTS INC., I will receive a prorated credit on my account for the uncompleted portion of the program. I also understand that no refunds or proration will be given for any other reason.

Signature of Parent/Guardian:

Date:



ACKNOWLEDGEMENT & CONSENT

- ✓ I hereby give permission for my child to go on out trips arranged by JLC Victoria Camp programs.
- ✓ I understand that by enrolling my child for JLC Victoria Camp programs, I am responsible for the total cost of the program. I understand that if I wish to withdraw my child's enrollment, I must provide 4 weeks' notice prior to the start of the program. I accept all responsibility for payment of all accounts rendered to my family.
- ✓ A late fee of \$5 for every 5 minutes late will be charged each time a child is picked up late from the Camp program. I understand there is a late pick up fee and agree to pay the fee when picking up my child, if incurred.
- ✓ I have disclosed any known special needs and will discuss further with the program supervisor prior to enrolling my child in any program.
- ✓ I certify that the information given in this form is complete and true in every aspect, and that I am the legal guardian.

Signature of Parent/Guardian:

Date:

FEE PAYMENT

Once receiving the confirmation email of your registration, please make full payment by **eTransfer** to payment@jlc victoria.com Your seat will be reserved as soon as the payment is confirmed. The delay of the payment may cancel your registration.