

# PNEUMAPALOOZA

## 2018

SUMMER CHOIR CAMP  
For Children & Teens Ages 5 to 18

August 27<sup>th</sup> -31<sup>st</sup>, 2018

8:45am – 4:30pm

Pacific Spirit United Church  
2195 West 45th Ave



A week at Pneumapalooza will include:



- ♪ Singing!
- ♪ Lunch and snacks daily
- ♪ Excellent, professional music coaching...
- ♪ More singing
- ♪ Art, Games, Faith Exploration... and more!
- ♪ More singing



For more information, contact:

Cathy Cryder at [cyfminister@drmt.ca](mailto:cyfminister@drmt.ca)  
Dr. Greg Caisley [gmusic@drmt.ca](mailto:gmusic@drmt.ca)



Cost:        sliding scale        \$170-\$230 per child or teen  
                  *(pay what you can)*        *before March 30<sup>th</sup>*



\$200-\$230 per child or teen  
*after March 30<sup>th</sup>*



#### **FINANCIAL ASSISTANCE AVAILABLE**

\*It is important to the Pneumapalooza staff team that cost is not a barrier to anybody's participation. Please speak to Cathy Cryder (*cell: 604-788-8679 / email: [cyfminister@drmt.ca](mailto:cyfminister@drmt.ca) / or in person Sunday morning or Wednesday evening*) if you require financial assistance in order for your child to participate.

PNEUMAPALOOZA REGISTRATION FORM:

PARTICIPANT'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

POSTAL CODE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

(MONTH, DAY, YEAR)

CARECARD NUMBER \_\_\_\_\_

CAREGIVER 1 NAME \_\_\_\_\_

CAREGIVER 1 CELL \_\_\_\_\_

CAREGIVER 1 EMAIL \_\_\_\_\_

CAREGIVER 2 NAME \_\_\_\_\_

CAREGIVER 2 CELL \_\_\_\_\_

CAREGIVER 2 EMAIL \_\_\_\_\_

ALLERGIES/MEDICAL CONDITIONS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DIETARY RESTRICTIONS \_\_\_\_\_

\_\_\_\_\_

I WOULD LIKE A CALL FROM A CAMP STAFF PERSON TO DISCUSS MY CHILD'S ALLERGY/MEDICAL CONDITION(s).

I WOULD LIKE TO DISCUSS FINANCIAL ASSISTANCE WITH A CAMP STAFF PERSON.

## PARENT/GUARDIAN AGREEMENT:

The undersigned parent or guardian does hereby consent to my/our child attending Pneumapalooza Summer Choir Camp at Pacific Spirit United Church, 3525 West 24th Avenue, Vancouver, BC, August 27<sup>th</sup> – 31<sup>st</sup>, 2018, and by these hereby release and discharge the sponsors of the said program for any injury to the person or property to my/our child during their participation therein. I/we also give permission for any medical treatment necessary during event.

Parent/Guardian name (Printed) \_\_\_\_\_

Parent/Guardian signature \_\_\_\_\_

Dated at: \_\_\_\_\_, BC on the \_\_\_\_\_ Day of \_\_\_\_\_, 2018

## PHOTO CONSENT:

The leaders of this event HAVE / DO NOT HAVE (please circle one) my permission to use photo(s) of my child for publication and I understand that my child's name will not be published.

Parent/Guardian signature \_\_\_\_\_

Dated at: \_\_\_\_\_, BC on the \_\_\_\_\_ Day of \_\_\_\_\_, 2018

## PARENT PERMISSION / CONSENT FORM FOR OUT TRIP:

I give permission for my child(ren) \_\_\_\_\_ to participate in any out trips while at Pneumapalooza. I understand that the group may be walking to the local playground and Maple Grove pool and that children will be given the option of swimming in the Maple Grove Pool while he/she/they are there. I also understand that the appropriate leader to child ratio will be maintained at all times. I authorize the staff of this event to seek emergency medical attention, on the advice of first aid personnel, should the need arise for my child.

Parent/Guardian signature \_\_\_\_\_

Dated at: \_\_\_\_\_, BC on the \_\_\_\_\_ Day of \_\_\_\_\_, 2018