



The Drop is a drop-in program for all youth in grades 5-12. It offers a place for youth to gather, socialize and play games in a safe and supervised setting run by the Wilmot Family Resource Centre at the Wilmot Recreation Complex. Centre Hours: Tuesday 6-9 Friday 5:30-9:30 Saturday 12-5

Participant Information

First Name: Last Name: Birthdate (D/M/Y)
Town/City: School: Grade:
Home/Cell Phone: Email:
Health Concerns: Allergies (please list with the reaction to watch for); Any other information you feel our staff needs to be aware of while supervising this young person:

Emergency Contact Information (Parent or Guardian)

Parent/Guardian (Required):

First Name: Last Name: Relationship:
Town/City: Home/Work/Cell Phone:
Email Address:

Email will be used to keep you up to date around any upcoming special youth events, concerns, celebrations etc..

If a Parent or Guardian cannot be reached:

Emergency Contact 1 (Required):

Name:
Relationship:
Phone:

Emergency Contact 2 (If Applicable):

Name:
Relationship:
Phone:

Waiver Information

THE UNDERSIGNED agrees they will therefore not hold any agencies, businesses, organizations or individuals involved in this program responsible for losses, damages, claims, actions, demands, suits and costs, arising directly or indirectly by virtue of enrollment in the W.F.R.C. Youth Drop-In. I have read this statement, fully understand it, and agree to its contents.

I give permission to W.F.R.C. to photograph and/or videotape for use in any future promotional material without compensation or notice. Photos/videos will only be used by the agency if deemed appropriate by staff.

- I agree to allow W.F.R.C. to use appropriate photos/videos of this participant
I do not agree to allow W.F.R.C. to use appropriate photos/videos of this participant

Parent/Guardian Signature: Date (D/M/Y):

By signing below, I acknowledge that I have read, understood and agree to all terms and conditions set out within the Youth Participant Agreement and Your Rights-Our Expectations

Participant Signature: Date (D/M/Y):

Parent/Guardian Signature: Date (D/M/Y):