



COUNSELOR IN TRAINING PROGRAM AGES 13 to 15

Child's Name	Date of birth
Address	Phone Number
Parent's Name:	
Parent Email address :	



CANADIAN RED CROSS **CROIX-ROUGE CANADIENNE**

April 8th to June 17th Wednesdays 6:00-9:00PM

\$250.00 + tax **REGISTRATION BEGINS FEBRUARY 17th**

NAV CANADA WILL NOT BE RESPONSIBLE FOR ANY MEDICAL, DENTAL OR HOSPITAL BILLS OR ANY OTHER EXPENSES CAUSED BY INJURY TO ANY PERSON PARTICIPATING IN ANY NAV CANADA RECREATION PROGRAMS. THIS BEING UNDERSTOOD, REGISTRANT AND PARENTS HEREBY AGREE AND SAVE HARMLESS AND INDEMNIFY NAV CANADA FROM CLAIMS FOR INJURIES.

Cancellations and Refund Policy:

Pool Fouling affects everyone. Any person without bowel control MUST wear a snug fitting disposable swim diaper. In the event of a pool fouling, we will make every attempt to contact parents. Should classes be cancelled as a result of a pool fouling there will be no rescheduled class. If your child is ill, please keep them at home.

Refunds: a full refund will be issued if we cancel a class for insufficient registration. A 50% refund will be given if a parent withdraws a child from a program after the second class. If a refund request is accompanied with a medical note a full refund will be issued. All refund requests must be directed to the Manager.

I have read and understand the cancellation and refund policy.

Initials of parent _____

Canadian Anti-Spam

Canada's Anti-Spam Legislation requires NAV FIT to obtain your consent before sending electronic communications to your e-mail address indicated below. Kindly provide your consent so we can stay in touch with you and send you NAV FIT related information, news, promotions and offers.

Member e-mail address: _____@_____

I consent I do not consent Member Signature: _____