



# Ta'an Kwächan Council

311 Ray Street • 9402 Quartz Road • Whitehorse, Yukon •

Telephone: 867.668.3613 o Facsimile: 867.667.4295 o E-mail: [info@taan.ca](mailto:info@taan.ca)

## Summer 2026 Day Camp Program Registration Form & Liability Waiver

### Hello Parents and Guardians!

We are thrilled to welcome your child to TKC's **7-week Summer Day Camp!** Camp is open to children **ages 7-13**, with priority given to TKC Citizens - but everyone is welcome to apply. Best of all, **camp is completely free of charge**, and TKC will provide a healthy breakfast and lunch every day.

Camp runs **Monday to Thursday, 8:30 AM to 4:00 PM** at **Takhini Elementary School**. Please drop off and pick up your child at Takhini Elementary each day.

If you know of exciting activities or events you'd love to see us include this summer, please reach out - we would love to hear from you!

### Which weeks will your child be attending?

Check all that apply - you can sign up for one week or all seven!

- June 23 – 25** (3-day week)
- June 29 – July 2** (3-day week)
- July 6 – 9**
- July 13 – 16**
- July 20 – 23**
- July 27 – 30**
- August 3 – 6**

**Registration Deadline: June 16, 2026**

Drop off your completed form at either TKC building (Ray Street or Quartz Road) or email it to Day Camp Coordinator **Adrianna Smith** at [educationstudent@taan.ca](mailto:educationstudent@taan.ca). Contact Adrianna with any questions or for help filling out this form.



**RELEASE OF LIABILITY AND WAIVER CLAIMS**

Name of Participant: _____	Birth Date (DD/MM/YYYY): _____	Age: _____
Parent/Guardian: _____	Parent/Guardian: _____	
Phone: _____	Phone: _____	
Email: _____	Email: _____	
Emergency Contact: _____	Emergency Contact: _____	
Relationship to Child: _____	Relationship to Child: _____	
Phone: _____	Phone: _____	
Email: _____	Email: _____	
Approved Drop-off/Pick-up Person(s): _____		
MEDICAL/DIETARY CONDITIONS: _____		
_____		

**DISCLAIMER**

I AGREE THAT the Ta'an Kwäch'än Council, its officers, directors, agents, contractors, employees, trainers, volunteers, members and representatives (the "TKC") are not responsible for any injury, loss or damage of any kind sustained by any person while participating in any and all activities, events, or social activities sponsored by or attended by the TKC (the "Activities"), including, injury, loss or damage which might be caused by negligence of the TKC.

I AGREE TO RELEASE THE TKC from any and all liability from any loss, damage, injury or expense that I may suffer, or that my next of kin may suffer as a result of my participation in the Activities due to any cause whatsoever, including negligence, breach of contract, or breach of any statutory or other duty of care.

I AGREE TO HOLD HARMLESS AND INDEMNIFY THE TKC from any and all liability for any damage to the property of, or personal injury to, any third party, resulting from my participation in the Activities.

I AGREE TO HOLD HARMLESS AND INDEMNIFY THE TKC in connection with the services and/or incidents/accidents of any train, vessel, carriage, aircraft, bus, privately owned or rented motor vehicle or other conveyance, which may be used during my



**RELEASE OF LIABILITY AND WAIVER CLAIMS**

participation in the Activities. Neither will the TKC assume any liability for any injury, loss, accident or delay which may be occasioned by reason of nay defect in any mode of transportation or through the act, error, neglect, negligence or default of any company or person engaged in transporting persons to the Activities.

**MEDICAL/HEALTH & TRAVEL INSURANCE**

I AM SOLEY RESPONSABLE to select and purchase adequate medical or health insurance. No medical or health insurance will be provided by the TKC. In the event of a medical or health problem, the TKC accepts no responsibility for any cost associated with medical or health.

I freely accept and assume all responsibility to provide myself with medical/health and travel insurance coverage.

**ACKNOWLEDGMENT**

I ACKNOWLDGE THAT I HAVE READ AND UNDERSTOOD THIS AGREEMENT, that I have executed this Agreement voluntarily, and that this Agreement is to be binding upon myself, my heirs, executors, administrators and representatives.

SIGNED THIS \_\_\_\_\_ Day of \_\_\_\_\_ at \_\_\_\_\_

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Printed Name of Witness**

\_\_\_\_\_  
**Signature of Witness**

(If under the age of 16 years, the signature of the parent or guardian is required)