

City of Pickering Registration Guidelines & Information

During distribution of this guide, applications are accepted and a random processing system is utilized.

Non-Pickering resident applications are processed approximately two weeks after leisure guide delivery.

Participants must meet program age requirements by the first class. Post-dated cheques must be dated a minimum of two weeks prior to the start date except for camps.

No cheques will be accepted for camps less than one month before camp start date.

Program Cancellations Due to Inclement Weather

Under extreme weather conditions, programs may be cancelled. To check on program cancellations due to inclement weather, please visit the City's website at cityofpickering.com under Program Cancellations & Service Disruptions or call 1.866.278.9993.

Refunds, Withdrawals, Transfers

A full refund is issued if the City of Pickering cancels a program. The City reserves the right to cancel programs due to insufficient registration. All leisure and aquatic requests for refunds must be submitted in writing prior to the second class. No refund will be issued after the second class unless accompanied with a doctor's note.

All refunds for aquatic leadership, private or semiprivate lessons and camps must be submitted five business days prior to the course start date. Aquatic leadership course refunds are subject to a \$35.00 administration fee.

Refunds are calculated on a pro-rated basis, based on the date the written request is received and subject to a \$10.00 administration fee. A \$42.50 fee will be applied to all NSF cheques returned by the bank to the City of Pickering.

If a client withdraws from a program with registration staff, a \$10.00 administration fee applies.

Cash, debit and cheque registrations will be refunded by cheque. Cheque refunds take four to five weeks to reach you by mail.

Withdrawals using Tele-Reg or Click to Reg can be made up to five days prior to the program start date and no administration fee applies.

Transfers are subject to a \$10.00 administration fee.

Children's Fitness Tax Credit

When your child is registered for an eligible program, you will receive confirmation indicating "Eligible for Children's Fitness Tax Credit" from the City of Pickering. Please keep your receipt as you may be required to submit it to the Government of Canada to process your Children's Fitness Tax Credit. For more information regarding the Child Fitness Tax Credit, the Child Disability Tax Credit or how to file your claim, visit www.cra-arc.gc.ca/fitness.

Waiting Lists

Your name will be added to the waiting list for your first choice only. You may add your name to a waiting list using Tele-Reg or Click to Reg without making a payment.

Enrollment Confirmation

Enrollment is complete when a confirmation letter or number (pending bank approval) is provided. You may call Tele-Reg at 905.420.4749 or check Click to Reg online at cityofpickering.com at anytime, or you may call 905.420.4621. For a second and subsequent confirmation letter a \$5.00 administration fee will be required.

Discounts

Where there are three or more children in the same family taking part in the same program, the third child will be charged half price. Discounts will apply to the lower priced program. This does not apply to Recreation Complex Memberships, as family rates are available. Additionally, this does not apply to Aquatic Certification Programs. Persons with disabilities and senior citizens (65+ years of age) are eligible for a 50% fee reduction, except in programs specifically designed for these individuals. A copy of a disability allowance cheque must be provided. No discount for 1-week summer camps. Please note, if registration is made through Tele-Reg or Click to Reg, the application must be made in writing to the registration office and these discounts will then be applied to your account.

Safe Arrival and Departure







For the safety of all program participants, we would ask that you walk your child into the program area when dropping them off and return to the program area to pick them up at the end of each class/session. Please ensure that the staff person responsible is aware of your presence when you pick up your child. If someone else is picking up your child, please inform one of the instructors at the beginning of the class. Admission to programs will not be allowed to children who show obvious signs of illness or health conditions that would compromise their safety or the health and safety of others. This includes communicable diseases, flu, watery eyes, runny nose, cold, fever, etc. If a child does not feel well during a program, parents will be called to pick them up. If your child is participating in a program this is held in a gymnasium, we would appreciate that you send your child with indoor shoes, as outdoor footwear is not allowed.

Participant Behaviour Guidelines

For all participants we want to ensure we encourage and create an environment of trust, safety and above all, fun! We will not accept disrespectful or aggressive behaviour. Our staff is trained to address inappropriate behaviour from participants of all ages. While we make every reasonable effort to ensure the enjoyment of all participants, if inappropriate behaviour is not changed, a participant's actions may lead to removal from our programs and services.

If you require further information regarding programs or registration, including family PIN numbers and client **barcodes**, please contact registration staff at 905.420.4621 or email registration@cityofpickering.com

6 Simple Ways to Register!

It's Easy as	1 ...	2 ...	3 ...
 Online!	Go online to cityofpickering.com and select the Click to Reg button to get started.	Go to the accounts tab to enter your Client Barcode and Account Pin. Select your programs and pay using a Visa or MasterCard.	After successful registration print or save a copy of your confirmation.
 By Tele-Reg	Call 905.420.4749 and follow Tele-Reg's voice prompt instructions.	You will need to enter your Client Barcode, Account Pin and the course barcode. You will need a valid Visa or MasterCard to make a payment.	After successful registration a confirmation will be mailed to you. If you fail to make a payment your transaction will be voided.
 By Fax	Complete a program registration form and include payment.	Fax your registration form to 905.831.9370.	Once processed, a confirmation letter will be mailed to you.
 24 Hr. Drop Box	Complete a program registration form and include payment.	Drop in the 24 hr. box outside of Pickering Civic Complex located between the Library and City Hall.	Once processed, a confirmation letter will be mailed to you.
 Mail In	Complete a program registration form and include payment.	Mail your registration form to Program Registration Culture & Recreation Division, 1867 Valley Farm Rd., Pickering, ON L1V 3Y7.	Once processed, a confirmation letter will be mailed to you.
 In Person	Come in person to the Pickering Recreation Complex, 1867 Valley Farm Rd.	Registration hours are Monday - Friday from 8:30 am - 4:30 pm. Visa, MasterCard, Debit, Cheque and Cash accepted.	You will be provided with a confirmation letter before leaving or one will be mailed to you.

For program or registration information including family PIN's and client **barcodes** call 905.420.4621 or email registration@cityofpickering.com
 TTY 905.420.1739



Programs and Aquatics Registration Form

General rules and regulations for registration are available at Registration, in this guide, or online at cityofpickering.com

FAMILY INFORMATION

phone number	email	emails will be sent to program registrants	
family address	unit/apt.	city	postal code
mother/guardian name	business phone	cell phone	Are you a new applicant? <input type="checkbox"/> yes <input type="checkbox"/> no
father/guardian name	business phone	cell phone	Have you changed address? <input type="checkbox"/> yes <input type="checkbox"/> no

Participant 1

last name	first name	birth date (M) ____ (D) ____ (Y) ____	<input type="checkbox"/> male <input type="checkbox"/> female
-----------	------------	--	--

Program Name / Swim Level	Location	Day	Time	Barcode	Fee
1 st choice					
2 nd choice					
special needs/allergies	Is there a special need or allergy (including peanut) our programmers should be aware of? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please provide details:				

Participant 2

last name	first name	birth date (M) ____ (D) ____ (Y) ____	<input type="checkbox"/> male <input type="checkbox"/> female
-----------	------------	--	--

Program Name / Swim Level	Location	Day	Time	Barcode	Fee
1 st choice					
2 nd choice					
special needs/allergies	Is there a special need or allergy (including peanut) our programmers should be aware of? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please provide details:				

Payment	<input type="checkbox"/> cash	<input type="checkbox"/> debit	<input type="checkbox"/> cheque payable to: City of Pickering
VISA	_ _ _ _ - _ _ _ _ - _ _ _ _		
MASTERCARD	_ _ _ _ - _ _ _ _ - _ _ _ _		
expiry date:	_ _ - _ _	amount to be charged \$	_____
card holder name (please print):	_____		
signature:	_____		

I hereby release the City of Pickering from all claims arising from any accidents or injury which are caused by or arise from participation of the applicants named above, during any program or in any facility or at any location where the program is being held.

signature: _____



How are you going to register today?
Online at cityofpickering.com
Fax with a credit card number to 905.831.9370
Tele-Reg at 905.420.4749
TTY 905.420.1739
Drop-off, Mail In or In Person at Pickering Recreation Complex (1867 Valley Farm Road)



Personal information contained on this form is collected under the authority of the *Municipal Act* and will be used for the purpose of program registration. Questions about this collection should be directed to the City Clerk at One The Esplanade, Pickering ON L1V 6K7 or 905.420.4611

MARCH BREAK CAMP REGISTRATION FORM

Program Registration is located at the Pickering Recreation Complex, 1867 Valley Farm Rd., South of Hwy. #2. 905.420.4621.

General rules and regulations for registration are available at registration, in this guide or online at cityofpickering.com



Family Information		Phone Number	email	
Family Address		Unit/Apt.	City	Postal Code
Mother's/Guardian's Name	Mother's Business Phone	Cell Phone	Are you a new applicant? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Father's/Guardian's Name	Father's Business Phone	Cell Phone	Have you changed addresses? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Participant #1

Last Name	First Name	Birth Date (M)____(D)____(Y)____	Male <input type="checkbox"/> Female <input type="checkbox"/>
-----------	------------	-------------------------------------	--

NOTE: Birthdates will be used for program planning only. No other use will be made of this information.

Camp Name	Type of Camp (Please ✓)	Date	Bar Code	Fee
1st Choice	Regular <input type="checkbox"/>			
	Extend <input type="checkbox"/>			
2nd Choice	Regular <input type="checkbox"/>			
	Extend <input type="checkbox"/>			

Participant #2

Last Name	First Name	Birth Date (M)____(D)____(Y)____	Male <input type="checkbox"/> Female <input type="checkbox"/>
-----------	------------	-------------------------------------	--

NOTE: Birthdates will be used for program planning only. No other use will be made of this information.

Camp Name	Type of Camp (Please ✓)	Date	Bar Code	Fee
1st Choice	Regular <input type="checkbox"/>			
	Extend <input type="checkbox"/>			
2nd Choice	Regular <input type="checkbox"/>			
	Extend <input type="checkbox"/>			

Additional Camper Information Required

Bus Stop _____ **Camper will be met at bus stop by parent daily: Yes: No**

Bus: #1 #2 #3 #4 #5

Special Needs:
***Please indicate if 1:1 staff support is required:** _____ (Application deadline is Jan. 16, 2012 for campers who require one-on-one support)

Allergies (including peanuts): _____

Medical Needs: Yes: No (if yes, explain): _____

Personal information contained on this form is collected under the authority of the Municipal Act and will be used for the purpose of program registration. Questions about this collection should be directed to the City Clerk at One The Esplanade, ON L1V 6K7 - 905.420.4611.

Method of Payment

Cash Debit Card Cheque Payable to: City of Pickering

VISA MASTERCARD

Expiry Date _____ Amount to be charged \$ _____

Card Holder Name (please print) _____

Signature _____

Signature _____

I hereby release the City of Pickering from all claims for damages arising from any accidents or injury which are caused by or arise from participation of the applicants named above, during any program or in any facility or at any location where the program is being held.

**Credit card registrations: Fax to 905.831.9370 or Tele-Reg to 905.420.4749
Drop-off, mail or register in person at the Pickering Recreation Complex.**