



Free Teen Program Membership Application Form

**must be submitted to the Recreation Programmer Office at PCCC
within 3 business days of being completed*

Applicant Information

Name (First / Last): _____ Male Female

Address: _____ (number and street)

_____ (city and province)

_____ (postal code)

Telephone Number: _____ Date of Birth (day/month/year) _____

Email Address (optional): _____

I would like to receive monthly email updates about FREE Teen Programs & Events?

Yes No

How Did You Hear About Our Free Teen Programs (check box):

Promotional Card A Parent/Guardian School Newspaper

City Teen Website Other _____

A Friend (if your friend is a City ID card member, list their name and they can win a prize for referring you) Friend's First & Last Name: _____

Program Information

City of Pickering Free Teen Program – Rules and Regulations - Applicant Agrees:

1. To provide my correct name, address & phone number
2. That I live in Pickering
3. That I am between 13-19 years of age
4. To listen to and do what staff have asked
5. No threats, profanity, trash talk, play fighting or fighting at any time
6. No weapons, toy weapons, drugs or alcohol
7. To have a wand check
8. No loitering on property
9. To have my bag / coat checked if asked
10. No filming or photographs to be taken at Programs/Events

* There is **zero** tolerance for breaking any rules.

* Those not adhering to the rules will be removed from any program

Applicant Signature: _____

Date: _____

Parent(s) Signature: _____

For Office Use Only (parent signature required if photo ID not available to confirm information i.e. Driver's License)

Application Verification Date: _____ Verified By: _____

Applicant Status: Accepted _____ Declined _____ Photo # on Camera: _____

PCCC: _____ St Mary: _____ Pine Ridge: _____ ESCC: _____ Other: _____

Parent on site to provide signature: Yes _____ No _____ Needs to be verified: _____

If declined, action taken: _____

Free Teen Program Membership ID Cards are the property of the City of Pickering.

Personal Information collected on this form is collected under the authority of the Municipal Freedom of Information Act and will be used for the purpose of Membership management. Questions about this collection should be directed to the City Clerk at One the Esplanade, ON LIV 6K7, or by phone at 905.420.4611



Model/Photo Release Form

To be used when photographing people.	
Subject's Name	Date
Event or Purpose	Photographer
Location	
I consent that the City of Pickering has the absolute right and permission to publish or use any and all photographic or pictures taken of me on this date.	
By signing this consent I understand that the photograph will be used in good taste and solely for the promotional purposes of the Corporation of the City of Pickering including the City's website, and the City will not sell the photograph, any prints or reproductions of the original, or the negatives under any circumstances without my written consent and permission.	
I hereby waive any right that I may inspect and/or approve the finished product that may be used in connection therewith or the use to which it may be applied.	
I have read the above authorization and release, prior to its signature by me. I understand the authorization and I confirm that I have had the opportunity to have it explained to me and that any questions I may have with respect to the authorization have been answered to my satisfaction.	
Guardian (proof of age may be required)	
(To be signed if subject of photograph is under the age of 18 years. Guardian may be required to provide proof of relationship to subject)	
Signature of subject if 18 years of age or over (proof of age may be required)	Date
Subject's Address	Subject's Phone No.
Guardian's Address	Guardian's Phone No.
(If telephone number and/or address of guardian is different than subject, both subject and guardian's address and number will be required)	

Personal information contained on this form is collected pursuant to *Municipal Freedom of Information and Protection of Privacy Act* and will be used for the purpose of responding to your request. Questions about this collection should be directed to the City Clerk, One The Esplanade, Pickering, ON L1V 6K7, 905.420.4611