

REGISTRATION FORM 2020

*Please note registrations are accepted on a first come first served basis.

All sections on registration form must be completed.

STUDENT:

PARENT/GUARDIAN:

Name:	Name:	
Date of Birth: (yyyy/mm/dd)	Home Phone:	
	Work Phone:	
Gender:	Cell Phone:	
Ontario Education Number (OEN):	Email:	
The OEN will differ from the student ID card number. See student's transcript for OEN. OEN number is 9 digits long.	Emergency Contact Name:	
	Emergency Contact Phone:	
	In the event that no parent/guardian is available the emergency contact listed above will be called.	
MAILING ADDRESS: (Permanent Residence of Stud	ent)	
MAILING ADDRESS: (Permanent Residence of Stud Street & Apt #: City/Town:	ent) Postal Code:	
Street & Apt #:		
Street & Apt #: City/Town:	Postal Code:	
Street & Apt #: City/Town: SCHOOL:	Postal Code: MEDICAL:	
Street & Apt #: City/Town: SCHOOL: Name:	Postal Code: MEDICAL: Allergies: Do you carry?	
Street & Apt #: City/Town: SCHOOL: Name: Guidance Counsellor Name:	Postal Code: MEDICAL: Allergies:	



INDIVIDUAL EDUCATIONAL PLA	N ((IEP)):
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Do you have an IEP? ☐ Yes ☐ No

Zoo School makes every effort to accommodate students' educational needs and requirements. In order to do so successfully, please inform Zoo School of an IEP at the time of registration. If Zoo School is not informed at time of registration this may result in accommodations not being able to be met.

Please provide a copy of the IEP to Zoo School.

COURSE SESSION DATES:

I would like to register for (please indicate):

COURSE PREREQUISITE:

Students must have successfully completed the necessary prerequisite: **Science SNC2D Grade 10. Academic.**

Please indicate which of the following applies to the student:

- Student has completed the prerequisite and report card is being sent in with registration.
- Student is currently taking the prerequisite and upon completion report card will be sent to Zoo School
- ☐ Student has not yet started preregisite course, but will be completed before the start of Zoo School



PAYMENT INFORMATION:

Toronto Zoo staff will contact you for payment once your registration has been processed. Registration is not confirmed until full payment is received by the Zoo and you have received confirmation via email.

Credit cards (Visa, MasterCard, AMEX) are the only accepted forms of payment. Sorry, we are unable to accept debit cards, debit credit cards, cheques, or cash.

Total Payment Due: \$1,675.00 (price includes 13% HST)

(HST # 119216398). Prices are subject to change.

I agree to pay the above total amount according to my card issuer agreement:

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Signature:	Date:
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Refund Policy

- Registration and payment will be accepted starting in January in the year preceding the start of the course (18 months prior to the course start date).
- Cancellations received in writing before January 1st in the year the course will commence will result in a refund of 90%. Zoo School will retain a 10% administration fee.
- ➤ Refund requests received after January 1, 2020 must be received at least 30 days prior to the beginning of classes for a refund of 50%. We regret that no refunds will be available after June 5, 2020 for the July session and July 10, 2020 for the August session.

COURSE POLICIES AND PROCEDURES:

- ♦ Please notify Zoo School before the course begins of any student requiring an accommodation, having an I.E.P., or learning disability.
- ♦ It is essential that students meet the minimum number of instructional hours to successfully complete the course. Students will be expected to complete additional assignments for missed classes.
- ♦ Zoo School has zero tolerance for plagiarism and other forms of dishonesty.
- ♦ Toronto Zoo reserves the right to cancel or change any program due to insufficient registration.
- ♦ Prices are subject to change.

Please check the box below to confirm that the parent/guardian and student has read the course policies and procedures and confirm that you agree to abide by all rules, regulations, financial policies, procedures, and standards of Zoo School.

Check here to agree to the above course policies and procedures

WAIVER * MUST BE COMPLETED IN FULL FOR REGISTRATION TO BE PROCESSED.

IN CONSIDERATION of the permission granted to me, or, in the event the student(s) is/are a minor(s),to:

[name of minor(s) (if applicable) participating in the program/event]

being a minor for whom I acknowledge I am legally responsible, to participate in the **ZOO SCHOOL** program held at the Toronto Zoo.

I, for the participant, myself, my heirs, executors, administrators, successors and assigns HEREBY, RELEASE, WAIVE AND FOREVER DISCHARGE, the Board of Management of the Toronto Zoo, the City of Toronto, and the Toronto and Region Conservation Authority and all their respective employees, agents, servants, contractors, representatives, elected and appointed officials, successors and assigns, OF AND FROM ALL claims, demands, damages, costs, expenses, actions and causes of action, whether in law or equity in respect of death, injury, loss or damage to my or their person or property HOWSOEVER CAUSED, arising or to arise by reason of my or their participation in the said program/event, whether as spectator, participant, or otherwise and whether prior to, during or subsequent to the participation in the program/event. I FURTHER HEREBY UNDERTAKE TO HOLD AND SAVE HARMLESS and AGREE TO INDEMNIFY all of the aforesaid from and against any and all liability by any or all of them arising as a result of, or in any way connected with, the participation in the said program/event.

While in attendance at any Zoo programs/events, I understand that I may be filmed, videotaped or photographed by or on behalf of the Toronto Zoo. My registration in the program serves as my permission for use of my image by the Board of Management of the Toronto Zoo. BY SIGNING THIS DOCUMENT, I ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREED to the above RELEASE, WAIVER AND INDEMNITY. I WARRANT that I am (or the participant is) physically fit to participate in the program/event.

To the best of my knowledge, this child is in good health and is physically able to participate in school activities. In the event of an emergency and/or special medical treatment, parents and/or emergency contacts will be notified immediately. If the parents cannot be reached, permission is hereby given to the Toronto Zoo to do whatever steps it deems necessary to ensure the safety and health of a child. This also allows permission of the Toronto Zoo to contact the child's family physician. I understand that it is the parent's responsibility to let the school know, IN WRITING, if my child is exposed to any infectious diseases, or if there are any medical changes in this child between the time this form is sent to the Education Office and the time school starts.

☐ Check here to agree to the above waiver

Dated at this day of

(place) (date) (month) (year)

*Parent / Guardian Signature:

Typing your name in the above field constitutes as your signature



Zoo School Registration must be submitted by emailPlease send your completed registration form to: **ZooSchool@torontozoo.ca**

How did you find out about zoo school?

CONTACT INFORMATION:

Mail: Toronto Zoo - Education Branch

Zoo School

361A Old Finch Ave. Toronto, ON. M1B 5K7

Ph: 416-393-6365 (during the months of September – June)

416-392-5944 (during Zoo School operating months July and August)

Email: ZooSchool@torontozoo.ca

Web: torontozoo.com/EducationAndCamps/ZooSchool.asp