

CYL Online Application Information Checklist

These are the questions that will be asked of each CYL applicant during the online application process. Please review the sections below, and prepare all the information **BEFORE going online** to answer these questions. If you leave your computer and search for answers to some of the questions while in the middle of your application, your session may time-out.

Please do not fill out and return this form. You must apply to CYL online. All applications are reviewed by CYL staff, who will contact you if any information is incomplete or incorrect. *Note that any missing information will delay the processing of your application. We cannot reserve a spot for you in CYL until your application is complete.*

1. PARTICIPANT INFORMATION

Participant Name	Family E-mail (family or parent's email)
Mailing address	Parent or guardian name
City	Parent or guardian phone
Postal Code	Emergency Contact
Home Phone	Emergency Contact Phone
Participant E-mail (CYL-er's personal email)	Requested CYL session and date

2. MEDICAL INFORMATION

Date of Birth	Name of Family Physician
Gender	Physician's Phone
Health Card Number	Physician's Address

- Please list any significant operations, accidents, and/or illnesses that may affect your participation in CYL activities?
- Are you taking any prescription medication regularly? If so, what?
- Do you have any restrictions requiring special consideration that will affect your participation in CYL activities? If so, please describe.
- Do you have any special dietary needs we should be aware of (allergies, restrictions, intolerance, etc.)? If so, please describe.
- Do you have allergic reactions we should be aware about (antibiotics/medication, insect bites or stings, seasonal, etc.)? If yes, what reaction
- Have you had, or are you presently experiencing any of the following? (Please select all that apply)
 - Asthma
 - Back pain or injury
 - Bleeding disorder
 - Cancer
 - Diabetes
 - Epilepsy
 - Heart disease
 - Hernia
 - High blood pressure
 - Joint injury/surgery
 - Neck pain or injury
 - Kidney disease
 - Menstrual difficulties
 - Seizures
 - Rheumatic fever
 - Tuberculosis
 - Ulcer
 - Other: _____

3. CO-OP OR CREDIT UNION SPONSOR INFORMATION

Organization Name (e.g. XYZ Credit Union)	Postal Code
Branch (if applicable)	Contact Person Name
Street Name and Number	Contact person's phone and extension
City	Contact person's e-mail

You will be asked to confirm that you understand the obligations to your sponsor as outlined below:

- a) I have discussed this CYL application with the sponsoring organization noted above and confirmed their acceptance of my sponsorship.
- b) I will bring general information about my sponsor to camp, to be used to tell others about my sponsor.
- c) I acknowledge that, as part of partially funding my attendance at CYL, my sponsor may have additional requirements for me before or after my week at Co-operative Young Leaders camp.
- d) In addition to any sponsor application form or process undertaken, participants must submit a fully completed On Co-op application form to be considered for CYL.

5. ACKNOWLEDGEMENTS

You will be asked for yes/no answers to the following questions. If you are uncomfortable answering Yes for any of them, please contact Kerr Smith at On Co-op prior to beginning the online registration. ksmith@ontario.coop or 1.888.745.5521 x29

A) Contact information

For purposes of potential carpooling, I grant permission for my basic contact information to be shared with other CYL participants from my specific week subject to On Co-op privacy policies.

B) Photo release

I grant permission for the use of any statements made, or images, pictures or movies taken of me during CYL or related activities to be used for the promotion of CYL, youth involvement, On Co-op or Ontario co-operatives.

C) Reduced paper option

A participant Information and Welcome package will be sent electronically approximately two weeks prior to your session. It may include waivers and other documents that must be signed and brought with the participant on their first day of camp. The parent/guardian (or participant if over 18) must check below to indicate how you would like to receive this information.

Yes, I would like to receive an **electronic** Package sent to the family email address as noted on the application form. **I understand that I must print, sign and bring any forms included in the Welcome Package with me to camp.**

No, instead I would like to receive a **printed** Welcome Package, mailed to the postal address as noted on the application form. **I understand that I must sign and bring any forms included in the Welcome Package with me to camp.**

6. YOU WILL BE REQUIRED TO CONFIRM THAT YOU HAVE READ AND UNDERSTOOD THE FOLLOWING:

a) Code of Conduct:

I have read the CYL Code of Conduct and the CYL Core Rules and agree to participate within these boundaries while in attendance at Ontario Co-operative Association activities. I further understand that any violation of the CYL Code of Conduct may be cause for dismissal from the activity/ program. The Code of Conduct and Core Rules can be viewed online at www.ontario.coop/cyl and will also be included in the Welcome and Information package.

b) Waiver:

i. I/We the undersigned am/are the participant (when of legal age) and/or the parent(s) and/or guardian(s) of the above named participant.

ii. In consideration of the Ontario Co-operative Association providing a program called Co-operative Young Leaders Ontario (CYL) for the participant during the time period specified above and in consideration of the sponsor providing funding for the program and in some cases providing transportation to and from the CYL Program, I/We the above named participant/parent(s) and/or guardian(s) of the participant hereby release and forever discharge the Ontario Co-operative Association and the sponsor from any and all claims, demands, damages or causes of action arising in any way as a result of the participant being provided the transportation, lodging, meals and activities of the Ontario Co-operative Association or the sponsor or any of their servants, agents, administrators or assigns of any third party.

iii. Further, in consideration of the participant using the transportation, lodging and food, I/We do hereby covenant and agree to indemnify and save harmless the Ontario Co-operative Association and the sponsor, their administrators and assigns from all actions, damages, debts, accounts, claims and demands which may hereafter be brought against them by or on behalf of said participant as a result of his/her use of said transportation, lodging, meals and activities or on behalf of any third party as a result of our child's participation in the CYL program or his/her actions during any part of the CYL program.

c) Accuracy of medical information:

This medical information is current at time of application submission. Applicant (if 18+) or parent/guardian is responsible to inform Ontario Co-operative Association of any changes to the applicant's medical history between time of application and actual attendance at camp.

7. ADDITIONAL INFORMATION

- All applicants will be contacted directly by the Ontario Co-operative Association within ten days. On Co-op reserves the right not to accept any applicant even if qualified by a sponsoring organization.
- Applications are accepted up to two-weeks before the start of each session, subject to availability and waiting lists.

- **IMPORTANT:** Applications are processed on a first-come, first served basis and only fully completed applications will be processed.
- We strongly recommend parents and participants read the information contained at www.ontario.coop/cyl. The CYL site includes directions to the camp location, what to pack, the code of conduct, sample daily schedules and other participant information.
- An Information and Welcome Package will be sent to each participant approximately two weeks prior to their session. Contact On Co-op if you do not receive your Welcome package, as it contains important information and last-minute updates.

8. CANCELLATIONS AND CHANGES

- A **\$50** cancellation fee will be charged to applicants who cancel their application anytime **before two weeks from the start of the session** they applied for. In this situation, the sponsor will be fully refunded and will be responsible for refunding any fees paid by the applicant. If an application is cancelled **less than two weeks from the start date of the session** applied for, there will be **NO** refund to the sponsor. Cancellation requests must be made in writing to the On Co-op Education Manager (ksmith@ontario.coop).
- A **\$25** administration fee will be charged to move a registered and confirmed participant from one session to another, **AND ONLY IF SPACE ALLOWS**. This fee is to be paid by the participant.
- A **\$25** administration fee will be charged to a participant if they apply multiple times.

Co-operative Young Leaders is a program of the Ontario Co-operative Association.
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