



# **CUPE Ontario Convention Toronto, May 27-30, 2009**

## **Youth Camp**

**CUPE Ontario is offering a very exciting program for youth ages 10 to 14 at this year's convention. This new program will take youth on a learning journey about unions with lots of fun things built in. The curriculum will touch on labour history, benefits to workers and society as a result of unions, the social and economic contributions of unions and the place of unions in today's society.**

**Some of the subject areas will be Human Rights, Health and Safety, the Environment, Poverty and Child Labour.**

**This will also be the chance for these budding activists to learn about CUPE's structure and why the work you do in your Local and at Conventions is so important.**

**So if you are the parent or guardian of a youth (age 10 to 14) sign up now!! This is our opportunity to build for the future and engage our youth in the labour movement.**

**It will be the "cool" place to be at Convention.**



## Convention 2009 Youth Camp Registration

Any delegate intending to bring their child(ren) aged 10-14 to our convention, please complete a **separate form for each child to be registered**. (Additional copies may be photocopied).

NAME OF FUNCTION	DATES
CUPE Ontario Convention	

CHILD'S NAME	Age	Medical Issues, Allergies or Special Care

Languages spoken: ☐ English ☐ French ☐ Other (please specify)

### CONSENT

I, \_\_\_\_\_ (parent/guardian) hereby give permission for my child registered above to participate in various recreational and leisure activities offered by the trained staff of the On-Site Child Care during the period of the above-named conference.

### RELEASE OF RESPONSIBILITY

I, \_\_\_\_\_ (parent/guardian) hereby release CUPE Ontario from any and all claims for damages to the safety or health of my child registered above, howsoever caused, while participating in any activities of the On-Site Child Care during the period of the above-named conference.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Address : \_\_\_\_\_

\_\_\_\_\_ Postal Code \_\_\_\_\_

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_ Local No. \_\_\_\_\_

Signature of Witness: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Witness: \_\_\_\_\_

(please print)

Please complete and return the above form **no later than Friday April 24, 2009** to:

**Youth Camp Registration - CUPE Ontario Convention 2009**

CUPE Regional, 305 Milner Ave., Suite 801 Scarborough, ON M1B 3V4

Phone: 416-299-9739 Fax: 416-299-3480