



**OFL 2ND ABORIGINAL GATHERING
 "WALKING IN OUR MOCCASINS"
 SHERATON HAMILTON HOTEL
 116 KING STREET W. HAMILTON, ON L8P 4V3
 JUNE 2 – 4, 2010**

CHILD CARE FORM

Return by May 14, 2010

Number of children requiring child care _____

Last Name	First Name	Age	Sex	Health Card #

Does your child(ren) require day care services?

Wednesday, June 2 — 6:00 p.m. — 9:30 p.m.
Thursday, June 3 — 7:30 a.m. — 10:00 p.m.
Friday, June 4 — 9:00 a.m. — 12:00 noon

Does your child(ren) have any special dietary or medical requirements? _____

Does your child(ren) have a nap during the day? _____

I give permission for my child(ren) to participate in an excursion _____

Any special requirements for your child(ren) (bottles, diapers, special food) should accompany the child(ren).

Unfortunately, due to prohibitive costs, child care will not be provided if less than ten (10) children register. If this happens, you will be contacted by phone.

RELEASE FORM

I hereby release the Ontario Federation of Labour from any and all claims for damages to the safety or health of my child(ren), however caused.

Name of Delegate _____

Organization _____ Local No. _____

Address _____

City/Town _____ Postal Code _____

Telephone [work] _____ [home] _____

[E-Mail] _____

Signature of Parent or Guardian _____ Date _____

Please complete and return form by May 14, 2010, addressed to Paulette Hazel, Ontario Federation of Labour, 202-15 Gervais Drive, Toronto, ON M3C 1Y8 or by Fax at 416.441.1893.