

PARENT CONSENT FORM

I give permission to Small Steps therapists and McGill students from the School of Communication Sciences and Disorders and the School of Physical and Occupational Therapy to provide speech and language and/or occupational therapy assessment and/or therapy (as indicated by the certified therapists) to my child at Camp.

I agree that:

1. The services are provided by Ometz and McGill University;
2. Any information obtained about my child will be treated as confidential;
3. I will receive in writing a summary of my child's participation in OT/ST;
4. The professional therapists and Ometz will retain a copy of my child's reports for legal and continuity purposes;
5. I will have the opportunity to speak with a therapist regarding services my child receives;
6. I have the right to withdraw my child from the camp at any time and will advise the Project Director of such withdrawal in writing;
7. I agree and hereby consent for my child to be videotaped or photographed for the following purposes:
 - Evaluating the effectiveness and efficiency of the camp in order to improve interventions;
 - Education/teaching;
 - Research by McGill University's School of Communication Sciences and Disorders and School of Physical and Occupational Therapy.

8. I confirm that the information I provided in the Small Steps application form is true and correct, and that I have not willingly refused to provide any relevant information.
9. I understand that it is my responsibility to provide camp staff with any changes to my child's medical information.
10. If, at any time, due to such circumstances as an injury or sudden illness, medical treatment is necessary, I authorize camp staff to take whatever emergency measures they deem necessary for the protection of my child while in their care. I understand that this may involve contacting a doctor, interpreting and carrying out his or her instructions, and transporting my child to a hospital or doctor's office, including the possible use of an ambulance.
11. I understand that this may be done prior to contacting me, and that any expenses incurred for such treatment, including ambulance fees, are my responsibility.