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*Hello Midwest Veterinary Conference Parents!*

Thank you very much for your interest in the Midwest Veterinary Conference children's program. Our goal is to provide your children with a program they want to attend, while providing you with that critical "peace of mind" feeling so you can attend event activities.

KiddieCorp is pleased to provide a children's program during the Midwest Veterinary Conference. KiddieCorp is in its twenty-sixth year of providing high quality children's programs and youth services to conventions, trade shows and special events. We take watching your children very seriously. KiddieCorp has enjoyed a long-time partnership with the American Academy of Pediatrics, which has helped to establish KiddieCorp as a premier provider of event children's program services.

### **ACTIVITIES**

Activities include exciting themes, arts & crafts, group games, music & movement, board games, story time, dramatic play, etc. We provide activities appropriate for each age group, using safe, sturdy equipment that you can feel comfortable with. Children can make their own choices within KiddieCorp's program.

**THEME – Wild, Wild West** Howdy partners! Let's get saddled up for one wild ride. Our adventure will begin when we dress the part. We will have a variety of Cowboy hats, scarfs, and sheriff badges. Yee Haw! All cowboys and cowgirls will learn how to master the rope like a real wrangler when we all do a little jump roping. It's a guaranteed good time for everyone! Next, we'll mosey on over to the arts and crafts table to make collages, bead creations, and wild west coloring sheets. No cowboy or cowgirl's day would be complete without an obstacle course to test their skills and relay races to keep them laughing. Then, we'll wind down our long day on the range by sitting around the imagination campfire to tell our favorite stories. So partners, saddle up and get ready to have the best time ever while we discover how the West was explored!

### **COMMITMENT**

Our goal is to provide your children with a comfortable, safe and happy experience. Our staff to child ratios are high to ensure that every child feels special (1:1 for children 6 weeks through 5 months; 1:2 for children ages 6 months through 11 months old; 1:3 for children ages 1 through 2 years old; 1:5 for children ages 3 through 12 years old). KiddieCorp team members are selected according to their integrity, experience, education and enthusiasm. They must be wonderful with kids! You will feel extra secure knowing that the KiddieCorp team is bonded and that we carry ample liability insurance.

### **WHERE, WHEN, FOR WHOM**

The program is for children ages 6 weeks through 12 years old. The dates for the program are February 23-26, 2012 and will be located at the Hyatt Regency in Columbus, Ohio. Snacks and beverages will be provided and meals need to be supplied by parents or purchased when checking in your child each day. Please note, purchased meals will be from a menu supplied by the Hyatt Regency.

### **REGISTRATION**

See the attached registration and consent form for event information. **The advance registration deadline is January 27, 2012.** Register early as availability is limited and handled on a first-come, first-served basis. KiddieCorp must receive both the registration/consent form and payment in full to hold reservations. Although every effort will be made to accommodate on-site registrations, there is no guarantee and it is not recommended.

### **NEED MORE INFORMATION?**

KiddieCorp is always available to answer any questions. Feel free to contact KiddieCorp by phone at (858) 455-1718 or by e-mail at info@kiddiecorp.com. **You can also register on-line at <https://www.kiddiecorp.com/ovmakids.htm>.**



**CHILDREN'S PROGRAM REGISTRATION FORM**  
 - Midwest Veterinary Conference • February 23 - 26, 2012 -



Parent Info: Last Name \_\_\_\_\_ First Name \_\_\_\_\_

E-mail address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**The pre-registration deadline is January 27, 2012.**

Children must be registered for a minimum of two consecutive hours per child, per day.

	Name(s)	Age(s)	(2 hour min.) Hours Needed	# of Hours
<b>Thursday, February 23</b> 7:00am - 6:00pm	1 _____	_____	_____	_____
	2 _____	_____	_____	_____
	3 _____	_____	_____	_____
<b>Friday, February 24</b> 7:00am - 6:00pm	1 _____	_____	_____	_____
	2 _____	_____	_____	_____
	3 _____	_____	_____	_____
<b>Saturday, February 25</b> 7:00am - 6:00pm	1 _____	_____	_____	_____
	2 _____	_____	_____	_____
	3 _____	_____	_____	_____
<b>Sunday, February 26</b> 7:00am - 5:30pm	1 _____	_____	_____	_____
	2 _____	_____	_____	_____
	3 _____	_____	_____	_____

Check here if your child(ren) has any special needs under the Americans with Disabilities Act. We will contact you.

Payment in full is required to confirm your reservations. Although every effort will be made to accommodate late or on-site registrations, there is no guarantee that KiddieCorp can accept children unless they are pre-registered.

**TOTAL FEE: \$8.00 per hour, per child x \_\_\_\_\_ # of Children x \_\_\_\_\_ # of Hours = \$\_\_\_\_\_**

**Check:** Payable to **KIDDIECORP**    **Credit Card\*:** \_\_\_\_\_ Exp. \_\_\_\_/\_\_\_\_

**Send completed forms & payment to:**  
 -US Dollars Only-

\*Visa, MasterCard or American Express

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- KiddieCorp staff does not administer medication. To ensure a safe and fun-filled environment, any child who is ill will not be admitted to the children's program.
- Please label your child's belongings. We will maintain a lost and found, however, KiddieCorp does not accept responsibility for the loss or theft of any toy, book, or other personal items.
- For parents with infants, please bring diaper changing supplies, formula/baby food, and a change of clothes.
- Cancellation Policy: Cancellations must be made to KiddieCorp prior to January 27, 2012 for a full refund. Cancellations made after that date will be subject to a 50% cancellation fee. Once the program has begun, no refunds will be issued.

# Midwest Veterinary Conference CHILDREN'S PROGRAM CONSENT FORM



- Child(ren)'s first and last names:

Name \_\_\_\_\_ Age \_\_\_\_\_      Name \_\_\_\_\_ Age \_\_\_\_\_  
 Name \_\_\_\_\_ Age \_\_\_\_\_      Name \_\_\_\_\_ Age \_\_\_\_\_

- Please list **only** those allowed to check-out the above child(ren) from the KiddieCorp children's program (please list first and last names; photo ID may be required when checking out children):

Name \_\_\_\_\_ Relationship to child(ren) \_\_\_\_\_  
 Name \_\_\_\_\_ Relationship to child(ren) \_\_\_\_\_

- Are any of your children **allergic** to anything (foods, etc.) or are any of your children taking **medication**? If yes, explain: (Note: KiddieCorp staff does not administer or assist in the administration of any medications.)

\_\_\_\_\_  
 \_\_\_\_\_

- Do any of your children have **health limitations** or **special needs**? Any **birthmarks** or **injuries** we should be aware of?

\_\_\_\_\_  
 \_\_\_\_\_

We, the undersigned adults, agree to place our child or ward in the KiddieCorp children's program. For ourselves, our child/ward (or children/wards), and each of our respective heirs, assigns, and next of kin, we hereby release and agree to indemnify and hold harmless KiddieCorp, Ohio Veterinary Medical Association, the Midwest Veterinary Conference and their respective officers, directors, agents, employees, assigns, vendors, and the owners and/or lessors of the facility or facilities where the program will be held (collectively "the Releasees"), from any and all claims which may now or hereafter arise from our child's/ward's (or children's/ward's) participation in the KiddieCorp program. We do not release claims arising from Releasees from any of their willful misconduct or gross negligence.

We have read the above and understand this release. Furthermore, in the event of an emergency or health concern, KiddieCorp has our permission to administer first aid, contact our pediatrician, or obtain emergency medical treatment for our child. We agree to pay all expenses incurred due to an emergency involving our child.

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (home) ( ) \_\_\_\_\_ (work) ( ) \_\_\_\_\_

Cell/Pager #: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Pediatrician's Name: \_\_\_\_\_ City: \_\_\_\_\_

Emergency Contact (Someone who is not at this location with you): \_\_\_\_\_

Emergency Contact Phone: ( ) \_\_\_\_\_

**We suggest you make a copy of your completed form as a reference. Confirmations will not be sent.** KiddieCorp reserves the right to limit participation of any child whose presence or behavior may disrupt the program or endanger the health or safety of others.