

# St. Ann's Preschool Confidential Registration Form



Child's Name: \_\_\_\_\_

Monday/Wednesday/Friday, 9:00am-12:00noon

4 year old Classes: \_\_\_\_\_

Tuesday/Thursday, 9:00am-11:30am

3 year old Classes: \_\_\_\_\_

In order to complete your application for REGISTRATION for 2021-2022 Preschool year, the following **must be submitted** with your application:

\_\_\_\_\_ Registration form completed and signed by **both** parents.

\_\_\_\_\_ \$40.00 Registration Fee (cash or cheque dated today) made out to **St. Ann's Parish**.

\_\_\_\_\_ Emergency Consent Form Card

\_\_\_\_\_ Copy of Birth Certificate

\_\_\_\_\_ Copy of Baptismal Certificate

\_\_\_\_\_ Immunization Records

\_\_\_\_\_ 10 postdated cheques dated **July 1st, 2021 (for Sept. tuition), October 1st-December 1st, 2021 and January 1st to June 1st 2022**. Make all cheques payable to **St. Ann's Parish**.

## Preschool Fees:

Tuesday/Thursday Classes: **\$145/ month**

Monday/Wednesday/Friday Classes: **\$175/month**

**Please be advised that Fees are payable in advance with MONTHLY POST DATED CHEQUES starting in July or FULL PAYMENT OF TUITION FEES in September (by cheque or cash). There will no longer be by month payments accepted.**

**ONE MONTH'S NOTICE is required for withdrawal and return of fees.**

**Questions? Please call JoAnn Nixon at 604-317-7966 before 8:00 p.m.**



**Child's legal family name:** \_\_\_\_\_ **Child's legal first name:** \_\_\_\_\_  
**Child's legal middle name:** \_\_\_\_\_ **Usual first name child goes by:** \_\_\_\_\_  
Male \_\_\_\_\_ Female \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Person(s) with whom the Child lives: \_\_\_\_\_  
Commencement date: \_\_\_\_\_  
Monday/Wednesday/Friday \_\_\_\_\_ 4 year old class  
Tuesday/Thursday \_\_\_\_\_ 3 year old class

**Father's name:** \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Occupation: \_\_\_\_\_ Home#: \_\_\_\_\_  
Work#: \_\_\_\_\_ Cell #: \_\_\_\_\_ Email: \_\_\_\_\_  
Working days and hours: \_\_\_\_\_

**Mother's name:** \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Postal Code: \_\_\_\_\_ Occupation: \_\_\_\_\_ Home# \_\_\_\_\_  
Work #: \_\_\_\_\_ Cell # \_\_\_\_\_ Email: \_\_\_\_\_  
Working days and hours: \_\_\_\_\_

If there is a Custody Agreement, Please give details \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If Catholic: Name of church & city where child was baptized: \_\_\_\_\_  
Name of parish you are currently registered at: \_\_\_\_\_  
Child's Pet: (type and name) \_\_\_\_\_

Siblings: Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
Name \_\_\_\_\_ Birthdate \_\_\_\_\_

**Signature of Parent:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Emergency contacts other than parent/guardian:**

1) Name: \_\_\_\_\_ Home #: \_\_\_\_\_

Relationship: \_\_\_\_\_ Work #: \_\_\_\_\_

2) Name: \_\_\_\_\_ Home #: \_\_\_\_\_

Relationship: \_\_\_\_\_ Work #: \_\_\_\_\_

People authorized to pick up child from preschool (include parents)

Home/Cell & Work

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ phone# \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ phone# \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ phone# \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ phone# \_\_\_\_\_

***Is there anyone not authorized to pick up your child?*** \_\_\_\_\_

Has your child previously attended preschool? \_\_\_\_\_

If yes, where? \_\_\_\_\_

**Medical Information:**

Care Card Number: \_\_\_\_\_

Family Dr.: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Does your child have development difficulties? Speech \_\_\_ Vision \_\_\_ Hearing \_\_\_

Does your child have any disabilities or serious illnesses? \_\_\_\_\_

Is your child on any Medication? \_\_\_\_\_

Does your child have Allergies? \_\_\_\_\_

Is there anything else you can think of that will help us to know and understand your child better?

**Has your child been immunized? Yes \_\_\_ No \_\_\_**

**Immunization History:**

Diphtheria/Pertussis/Tetnus \_\_\_\_\_ HIB Meningitis \_\_\_\_\_

Poliomyelitis \_\_\_\_\_ Measles/Mumps/Rubella \_\_\_\_\_

Please indicate where original records can be found:

Which Health Unit Office: \_\_\_\_\_

Which Doctor's Office: \_\_\_\_\_

**PARENT AGREEMENT**

- 1: Parents or Guardians who decide to withdraw are required to give 30 days written notice from the first of the month. FAILURE TO DO SO WILL RESULT IN THE LOSS OF THE ONE MONTH'S FEE.**
- 2: There will be NO refunds or credit issued for days missed due to illness, vacation days, Professional Development days, statutory holidays or days closed due to bad weather.**
- 3: We require 10 postdated cheques, one for each month of preschool, dated for the 1<sup>st</sup> of each month. The September cheque is due July 1<sup>st</sup>, 2021. We also require a \$40 one time registration fee that is non-refundable. There will be a charge of \$15 for NSF cheques.**
- 4: Parents agree to attend a Parent Orientation and a Meet the Teacher in the beginning of September.**
- 5: Parents or caregivers must accompany their child to the preschool classroom and stay until your child is settled.**
- 6: Children who are ill must be kept home (please see policy in parent hand book). If the child or close family member has a communicable disease please contact a staff member.**
- 7: If a child becomes ill during the time in our care the parents/caregiver will be contacted and asked to pick up the child. In event of an emergency 911 will be called and then the parents will be notified.**
- 8: Parents/caregivers should engage in daily contact with the staff to share information and relay messages about their child.**
- 9: Questions concerning the child or the program should be directed to the staff. Parents/caregivers are requested to visit the parent board and read monthly newsletters. Please ask questions if anything is unclear.**
- 10: We have several field trips throughout the year. Parents are asked to transport their child to and from field trips.**
- 11: Photographs of your child will be taken and used in relation to St. Ann's Preschool. These may be posted on bulletin boards in our preschool, in our cubbies and our end of year CD.**
- 12: The Preschool Staff has the overall responsibility for the preschool program, including setting limits, health standards and safety measures. Parents are to let *staff deal with any behavioral issues* even if the parent/caregiver is present.**

**Please refer to Parent Handbook for more information about our Preschool Policies and Procedures.**

**I HAVE READ AND FULLY UNDERSTAND THE ABOVE AGREEMENT.**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date