

SOLID FOUNDATION CHILD DAYCARE

REGISTRATION FORM

FULL NAME OF CHILD			
BIRTHDAY (Y-M-D)			
DAYS OF WEEK ATTENDING		START DATE	
A.H. C#		ALLERGIES	
CHILD'S ADDRESS			
REQUIRED HOURS OF CHILD CARE		FROM:	TO:
PARENTS INFORMATION		MOTHER	FATHER
NAME:			
HOME ADDRESS:			
PHONE NUMBER:			
EMAIL ADDRESS:			
OCCUPATION:			
WORK ADDRESS:			
MARITAL STATUS:			
EMERGENCY CONTACT PERSON (ANY TWO) TO WHOM DAYCARE STAFF CAN RELEASE CHILD			
NAME:			
RELATIONSHIP:			
ADDRESS:			
PHONE #:			
NAME OF PERSON NOT ALLOWED ACCESS TO CHILD		RELATIONSHIP	
ARE THERE ANY COURT ORDERS IN PLACE (If so, please provide copy)			
FAMILY DOCTOR'S NAME		ADDRESS/PHONE #	
On going medication, allergies, hearing or sight difficulties? Please use back of this form if necessary.			
ARE IMMUNIZATION UP TO DATE: (Please provide copy of immunization form)			

SOLID FOUNDATION CHILD DAYCARE CENTRE

CONSENT & AGREEMENT FORM

I agree that my child can be taken for walks within the vicinity of the Solid Foundation Child Daycare Centre, Unit 1 - 1411 - 33 ST NE Calgary, Alberta. I understand that the children will be accompanied by the daycare teachers. This Consent Form applies as long as my child is attending Solid Foundation Child Daycare Centre. I also authorize the daycare to transport my child to and from school. I will also agree that in case of an Emergency involving my child, I will authorize Daycare Director or Daycare staff to call 911 for an ambulance. I understand that all the medical and emergency transportation costs are my responsibility.

Signature Of Parent: _____ Date: _____

OTHER CONDITIONS AND AGREEMENTS

I agree to the following conditions:

1. To give one month written notice before withdrawing my child. I understand that I will have to pay the next month's full month's fee (parent portion & subsidized portion) for any reason if I don't give the one month written notice. I understand that there will be no refund if my child withdraws from the daycare before that particular month is finished.
2. To pay daycare fees in advance, or on the first working day of each month. I understand that I will have to pay a LATE PAYMENT CHARGE OF \$5.00 PER DAY (If fee is paid from 2nd to 10th of that particular month). I understand that there will be an additional \$5:00 penalty charge per day over late payment charge if fees paid later than 10th of that particular month.
3. To have my child picked up by 6:00pm each evening or to pay a LATE PICK-UP CHARGE of \$1:00 PER MINUTE PER CHILD for the time my child remains at the daycare after 6:00pm. I understand that I will have to pay this late pick-up charge on the same day or on the next day by cash.
4. To pay a NSF PENALTY CHARGE of \$ 40.00 if my cheque is returned by the bank (NSF cheques). I understand that I will have to pay my future daycare fees by cash or certified cheque if I write a NSF cheque
5. I understand that FEES ARE NOT REFUNDABLE FOR TEMPORARY ABSENCES, (parents must pay full month's fee while children are absent due to summer/Christmas holidays, etc.) This is to keep my child's space at the daycare.
6. I understand that the daycare reserves the rights to require the withdrawal of my child should the daycare decide it is best for the child or the daycare. I am aware that the daycare can refuse my child if I repeatedly pay my daycare fees late.
7. I understand that my child has to be at the daycare for certain hours required by the subsidy office. I am aware that if child do not have enough required hours at the daycare, I will have to pay that subsidized portion which the daycare will not receive from the subsidy office which is \$5.00 per hour. (for example, if my requirement hours is 100 hours and I only come 75 hours, then I will have to pay 25 hours worth of subsidized portion of \$125 which is \$5.00 multiplied by 25 hours). I am also aware that I will have to pay the full month's fee if my child comes less than 50 hours. This is because I will be rejected a subsidy for that month if my child has less than 50 hours at the daycare.

Parent's Signature: _____ Date: _____

SOLID FOUNDATION CHILDDAYCARE REGISTRATION FORM Contd

In order to provide you quality service we need more information regarding your family values and beliefs

What are your expectations regarding your child's care:

What are your child's like and dislike:

Any other information you wish to share with us:

Any food preferences:

SOLID FOUNDATION CHILD DAYCARE CENTRE

CONSENT FORM

Director, Solid Foundation Child Daycare Centre

I agree that my child can be taken for walks within the vicinity of the Solid Foundation Child Daycare centre, Unit 1 - 1411 - 33 ST NE Calgary, Alberta. I understand that the children will be accompanied by the teachers. This Consent Form applies as long as my child is attending the Solid Foundation Child Daycare Centre.

Signature of Parent:

Date:

In case of an EMERGENCY Involving my child, I authorize The Daycare Director or Daycare staff to call a physician, or, if the situation warrants, to take the child directly for care to the nearest emergency centre, or to call 911 for an ambulance. I understand that all the medical and emergency transportation costs are my responsibility.

Signature of Parent:

Date:

Solid Foundation Child Daycare Centre

DISCIPLINE

- (1) We will use positive reinforcement and concentrate on positive situations and behaviors.
- (2) We will encourage self-discipline by guiding and redirecting the child to work out her/his own solutions to problems.
- (3) We may remove a child from a particular situation to allow that child to calm or melt down period.
- (4) We will communicate discipline policies, expectations and concerns with the parents on a regular basis.
- (5) The Director of the Daycare reserve the right to have a child withdrawn from the program if it is deemed in the best interests of the child or the Daycare.

Signature of Parent:

Date:

SOLID FOUNDATION CHILD DAYCARE CENTRE ANNUAL AUTHORIZATION FORM

I/We understand that the SOLID FOUNDATION CHILD DAYCARE CENTRE (hereafter called the Daycare, which term shall include the Daycare's directors, childcare takers, and teachers) arranges, for children in the Daycare, excursions or tours which, in the opinion of the Daycare, have definite educational, athletic, or cultural value, and are an integral part of the Daycare's program.

I/We, being the parent(s) or Guardian(s) of _____ (name of child) (hereinafter called "the child") consent to the student participation in any such tours or excursions arranged by the Daycare, and we authorize the participation by the child. It is understood that my/our consent and authorization are subject to the following conditions:

- (1) The Daycare accepting responsibility for any injuries or damages which may be suffered by the child while involved in such tour or excursion which results from the negligence of the Daycare.
- (2) The Daycare advising me/us in writing of the following particulars of any tour or excursion at least two days prior to the intended date of the tour or excursion:
 - Destination
 - Arranged supervision
 - Date(s) and time(s)
 - Transportation plans
 - Costs, if any
- (3) My/Our having the right to advise the Daycare, in writing, at least one day before the commencement of any particular tour or excursion, that I/we do not consent to the child participating in the tour or excursion, in which event my/our consent and authorization will be considered as withdrawn for the particular tour or excursion and the child not be allowed by the Daycare to participate in such tour or excursion.
- (4) This consent and authorization will be in effect as long as the child is enrolled in the Daycare.

Dated at Calgary, Alberta this _____ day of _____ year _____.

Signature(s) of Parent(s) or Guardian(s): _____

PARENT ORIENTATION CHECKLIST

When parents come to our daycare centre, we show them around the building, Inside and individual rooms. We also introduce them to the staff by their names.

- Tell the parents to review the parent handbook and we ask them if they have any questions.
- Try to find out if the parent will qualify for subsidy or if they will pay from their pocket.
- Discuss about the fees and rules of the subsidy and renewals such as:
 - ❖ \$300.00 deposit \$500.00 for two children or more, refundable with a one month written notices when leaving the daycare.
 - ❖ \$35.00 for one child registration fees (non-refundable}
 - ❖ \$50.00 for two children registration fees (non-refundable)
 - ❖ The parent's portion depends on the child's age.

Parents Signature: _____

Directors Signature: _____

Date: _____

Date: _____

DAYCARE PHOTO RELEASE FORM

I, _____ the parent of a child/children at _____ (Hereinafter known as the "Daycare), agree to the following:

I understand that my child(ren) whose name(s) are listed below may be photographed at the Daycare during normal daycare hours, field trips, or activities. I understand that these photographs may be used in promoting childcare services, either in print or on the Internet.

The child(ren) are known as: _____

With my signature below I grant permission for my child(ren) to be photographed, or their Images recorded for print or electronic use in promoting the Daycare's services. I understand that it is my responsibility to update this form in the event that I no longer wish to authorize the above uses. I agree that this form will remain in effect during the term of my child's enrollment. I understand that there will be no payment for me or my child's participation in this release.

Parent/Guardian Signature _____ Date _____

Relationship To Child _____

I am the parents/guardian of _____, I
have read and understood Solid Foundation Child Daycare Rules and
Regulations.

I will abide by the rules and regulations of Solid Foundation Child Daycare.
Failure to do so will result in my child being removed from the Daycare.

Parent's Name:

Date:

Parent's Signature:

SOLID FOUNDATION CHILD DAYCARE CENTRE

Child's Full Name: _____ D.O.B _____ (Y-M-D)

Child's Address: _____

Guardians Name: _____

Address: _____

Home Phone: _____

Mother's Phone (work): _____

Work Address: _____

Father's Phone (work): _____

Work Address: _____

A.H.C #: _____

Is Immunization Updated: yes / no

Ongoing medications: yes/no

Allergies or Health Issues: _____

Dr. Name & Phone #: _____

Emergency Contact & Pick Up: Name & Phone #:

Parent's Signature: _____ Date: _____

SOLID FOUNDATION CHILD DAYCARE CENTRE

Child's Full Name: _____ D.O.B _____ (Y-M-D)

Child's Address: _____

Guardians Name: _____

Address: _____

Home Phone: _____

Mother's Phone (work): _____

Work Address: _____

Father's Phone (work): _____

Work Address: _____

AH. C#: _____

Is Immunization Updated: yes / no

Ongoing medications: yes/no

Allergies or Health Issues: _____

Dr. Name & Phone #: _____

Emergency Contact & Pick Up: Name & Phone #:

Parent's Signature: _____ Date: _____

Solid Foundation Child Daycare Inc.

Unit 1 - 1411 - 33 ST NE Calgary, Alberta. T2A 5P1

Pre-Authorized Debit Agreement

Parent Information:

Name: _____

Address: _____

Email: _____

Payment Details:

Amount: _____

Frequency: Monthly

Process Date: _____

Number of Instalment: Good till cancel

I/we authorize Solid Foundation Child Daycare Inc, to debit my account as outlined in the payment terms of this agreement. I agree to waive any regulatory or legislative requirement for pre-notification.

I/we have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement.

This authority is to remain in effect until Solid Foundation Child Daycare Inc. has received written notification from me/us of its change or termination. This notification must be received at least ten (10) business days before the next debit is scheduled.

Please attach a VOID Cheque or fill in the Bank details: Personal: _____ Business: _____

Payer Name(s): _____

Name of Bank or Financial Institution: _____

Bank or Financial institution Address: _____

Transit #: _____ Branch ID: _____ Account#: _____

Signature: _____ Date: _____