

Registration Forms

Precious Angels Day CARE

10915 110 St NW, Edmonton, AB T5H 3E3, Canada Call: +1 780-990-1616 Email: info@preciousangelsdaycare.ca

2017/10/14

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Portable Emergency Information Record

General Information				
Child's Name:				
Child's date of birth:				
Alberta Health Care Number:				
Child's current address(es) and postal code(s):				
Parent's Information				
Mother'sname :				
Mother' s current address:				
Home phone number:	Cell phone nu	ımber:	Business phone number:	
E-mail:	Place of work:			
Father's name:				
Father's current address:				
Home phone number:	Cell phone nu	ımber:	Business phone number:	
E-mail:	Place of work:			
Emergency Contact to whom Child Can Be Released				
Name:	Current address:			
Relationship to child:				
Home phone number:	Cell phone number:		Business phone number:	
Alternate Emergency Contact to whom Child Can Be Released				
Name:	Current address:			
Relationship to child:				
Home phone number:	Cell phone number:		Business phone number:	
Child's Health Information				
Family physician's name and phone number:				
Allergies:		Ongoing medication:		
Immunization up to date? Yes No				

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Parental Agreement of Childcare

number to indicate that you have read it and are in agreement.)

_____1. I will pick up my child from Precious Angels Daycare Center no later than 6:00 pm.After 6:00 pm, I agree to pay a basic fee of \$20, plus an additional \$1.00 per minute after 6:00 pm until my child is removed from the Daycare facility.

2. I/ We will notify Precious Angels Daycare if my/our child is to be absent even forone (1) day.

_____3. All child care fees are due in advance; on or before the first (1st) calendar of each month.

- ★ A \$35.00 late fee will be charged if payment is received after the 5th day of the month
- ★ Child care fees are rated on a per calendar month basis and shall not be subjected to any adjustments on grounds of partial month attendance, statutory holidays and civic holidays, sick days, vacation or absent times of the like
- ★ If a child is enrolled in the Daycare mid-month , the full monthly fee is still required

4. I / We agree to abide by the sick policy and will not bring my/our child to Precious Angels Daycare if he/she is not well

★ If he/she has been exposed to, or contacted a contagious disease, I/ We will report and discuss the circumstances with the Director immediately and a medical certificate will be required prior to the child returning to Daycare.

_____5. I/ We will advise the Director immediately of every change of address, phone number, marital status, place of employment or schooling, so that I/We may be contacted without delay when necessary.

_____6. I/ We agree to give notice, in advance, or any changes or additions regarding persons who I/ We have approved to have access to my/our child

- ★ I / We accept responsibility to ensure that my/our child is signed into and out of the care of Precious Angels Daycare, as required
- ★ In the case of a divorce or shared custody, I/ We agree to provide a letter to indicate whose custody the child is in at all times

_____7. I understand that, if I desire to terminate our enrollment in Precious Angels aycare,I/ We are to provide in writing, 30 days notice

- ★ This notice to withdraw must be received by the Director on or before the 1st day of the child's last month in the Daycare
- ★ I/ We understand and accept that notices received after the 1st day of the month will be considered late and, as a result I/ We will pay an additional month's day care fee

8. I/ We, whose name(s) are entered above and who are the undersigned of this agreement, agree to pay daycare fees to the child named herein

LIABILITY: I/ We further agree to hold Precious Angels Daycare, and its agents harmless for any liability t to my child or any guardian or parent thereof because of any claims on behalf of my child against the Daycare or any agent thereof because ofany injury or alleged injury to my child. Should legal action for any reason be taken against the Daycare or any employee or agent thereof on my child's behalf and the school or its legal agent not to be found at fault, I/ We agree to pay any attorney fees, court fees, damages, or other costs that the Daycare or its agent incur to defend itselfagainst such action.

Parent/Guardian Name and Signature Date
Parent/Guardian Name and Signature Date
Director Date

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PRECIOUS ANGELS DAYCARE CHILD BEHAVIOUR POLICY CONTRACT

Precious Angels Daycare has a zero tolerance policy for disruptive and disrespectful behaviours. Unacceptable behavior toward peers and /or staff members; such as, but not limited to, inappropriate language, physical harm (bitting, hitting, throwing objects), and constant disobedience will not be permitted. In order to ensure safety and a peaceful **elivinidreentrfo**staff in the daycare the following procedures will be followed:

★ First Offense: This will occur after two incident forms due to the aforementioned inappropriate behaviours have been written up within a calendar month. The Director will notify the parents via. telephone or letter regarding the inappropriate behaviours and parents will be required to sign the incident report form. At this time, the Director will endeavour to work in cooperation with the parents/ guardians to seek solutions.

★ Second Offense: The child will not be permitted to return to the daycare for one day. There will be no fee compensation, as parents have had adequate notification regarding the inappropriate behaviours.

★ Third Offense: Parents will be notified that their child's enrolment at Precious Angels Daycare

is being terminated with little or no notice, due to the severity of the child's behaviour. Additionally, in the case of an enrolment being terminated, no fee compensation or

We understand that all children grown and develop at different stages and it is not our intention to have any children leave due to behaviour issues. When a child's behaviour is threatening or harmful toward their peers or daycare staff members, we find it necessary to respond to these behaviours in a manner that will benefit everyone.

I/We,______understand, if that my/our child,______,

displays inappropriate and/or disrespectful behaviours as outlined above, I/ We will comply with the disciplinary actions stated above; no matter how inconvenient this may be.

Parent/Guardian Name and Signature	Date
Parent/Guardian Name and Signature	Date
Precious Angels Daycare Director	Date

Precious Angels Daycare Director

ACCIDENT/SICKNESS POLICY

In the event of a medical emergency, I_____, understand that every effort will be made to contact me or the emergency contact person(s). In the event that none of the above can be reached, I hereby give permission to the staff of Precious Angels Daycareto seekmedicaltreatment necessary for

(child's name)

I agree to be responsible for any costs incurred.

Date:_____

Signature:_____

FIELD TRIP POLICY:

authorize the staff of Precious Angels Daycare Ι, to takemy child off the premises of Precious Angels Daycare for purposes of outdoor activities.

Please note that for any major outings advance notice will be given, along with all pertinent details, requiring my signature signifying my permission.

Date:_____ Signature:_____

TRANSPORTATION POLICY

hereby give permission to Precious Angels Daycare to Ι, transport my child in the event of field trips and/or to school.

Date:_____ Signature:_____

PICTURE RELEASE POLIGY

I, hereby give permission to the staff of Precious Angels Daycare to photograph my child during daily activities and special events. I understand and agree that these pictures may be displayed in the centre and/or be displayed on banners, flyers, bulletin boards, and screen productions for the purposes of Daycare family events or Daycare advertising.

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CHILD'S HEALTH HISTORY

Child's name:_____ Age: Please check any that apply to your child: Heart Condition Asthma _____Drug Allergies Diabetes Allergies ____Epilepsy _____Physical Limitations (explain below) _____Seizures _____Emotional Disabilities _____Hemophilia HIV Virus Hyperactivity If any of the medical conditions listed above apply, please explain: Is your child currently taking any medications(s):_____ If YES, please list the medication(s) and the reason for taking the medication(s):_____ Does your child have any special needs (including social, physical, emotional abilities or disabilities)?:_____

Does your child require the assistance of an outside agency (an Aid, Community options, etc.)?:_____

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NOTICE OF NONDISCRIMINATION POLICY AS TO STUDENTS

Precious Angels Daycare admits children of any race, color, nationality and ethnic origin toall the rights, privileges, programs, and activities generally accorded or made available to children in the Daycare. It does not discriminate on the basis of race, color, nationality and/or ethnic origin in administration of its childcare policies, admission policies, or daycare administered programs.

Note: This application will not be processed without the \$45.00 application fee. This fee is a no guarantee, non refundable fee.

Parent Handbook

I acknowledge that I have read the contents of the Parent Handbook and agree with the contents of the provided information from Precious Angels Daycare.

Parent/Guardian Name and Signature Date
Parent/Guardian Name and Signature Date

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Precious Angels Daycare & After schoolFamily Profile

Parent's Name:_____

Child's Name:_____

What is the cultural background of your family?

What are the other cultures followed in the family?

Do you speak a second language at home?

Please write child's name in your home language. (If any)

Will you be willing to share words from your home language with the staff, to use in program planning?

Yes No

What cultural celebrations you participate in?

_ _

Will you or anyone in the family willing to share any artifacts from your culture, with children during circle time?

____Yes___No

Do you, or anyone in your family, have a special skill or talent that could be shared with children?

Do you have any community connections that could be used by the daycare?

Precious Angels Daycare & Afterschool wants to ensure that your family history become apart of our programming with our children. We acknowledge and appreciate your contribution to celebrate diversity with us!

Thank you for completing this form.

Created: April 2016 Added to Registration form