

East Plains Child Care Centre

REGISTRATION PACKAGE 2019-2020

East Plains Child Care offers full day programs for children between the ages of 4 months to 18 months (Infant) 18 months to 30 months (Toddler) and 31 months to 5 years (Preschool). We offer 2, 3, 5 Day Programs, Monday to Friday from 7:00 am – 6:00pm. We are a wheelchair accessible facility. Children at all levels of development are integrated and supported.

If you are interested in subsidy for tuition, please contact the registrar for more information. The Region of Halton can assess your family for qualification.

Instructions and Important Information

Please complete all of the following registration forms for each child you wish to enrol.

When completing the forms, please do not leave any fields blank. If a section is not applicable please fill in 'N/A'.

When requested, please provide complete contact information (including street numbers and postal codes).

In addition to the forms in this package, we ask that you submit a digital copy of a recent photograph of your child. This photo will be kept in their file and in our emergency binder so that children can be identified in case of emergency.

Proof of Immunization/Immunization Exemption Forms: If your child has been vaccinated, you will be asked to submit a copy of your child's yellow immunization card to the school in order to show that all vaccinations are up to date. Alternatively, if you have chosen to exempt your child from receiving vaccinations for either medical reasons or conscience or religious beliefs, you are required to submit the appropriate supplemental form (either the Statement of Medical Exemption or the Conscience or Religious Belief Affidavit) both to the school and to the Halton Region Health Department. Copies of these forms and further explanation of the process for their completion can be found on the Halton region website or by visiting a notary public.

If your child requires an EpiPen you are required to submit the Anaphylaxis Emergency Plan Form as well as a permission to administer an Epi-Pen Form.

All completed forms, additional photos/documents required, and tests/proof of tests are to be submitted prior to your child starting school. The deposit (first month of fees along with the one time \$100 registration fee) is due at the time of registration and is applied to your child's first month of fees.

Until the Supervisor receives your completed registration package and the non-refundable deposit, a child is not considered to be enrolled at the centre.

Please use the attached Registration Package Checklist to verify that you have completed and submitted ALL the necessary components of the registration package.

Any questions regarding these forms can be addressed by emailing the Supervisor or by calling the preschool at 905-681-0233, or by viewing our website, www.eastplainspreschool.com

Please complete one set of forms for each child. ALL fields MUST be filled in. If something does not apply, please mark it with 'N/A', do not leave it blank.

Registration Forms

Child _____
Surname First Name Preferred Name

Date of Birth _____ Age _____ Gender [] Male [] Female
Month/ Day/ Year

Address _____ City _____

Postal Code _____ Home Phone _____

Custody [] Mother [] Father [] Both [] Guardian (specify)* _____
**Please provide legal documentation*

Living Arrangements _____

1) Parent/Guardian Name _____

Address: _____ City _____

Postal Code _____ Home Phone _____

Work Name _____ Work Phone _____

Work Address _____ City _____

Postal Code _____ Cell Phone _____

Email Address _____

2) Parent/ Guardian Name _____

Address: _____ City _____

Postal Code _____ Home Phone _____

Work Name _____ Work Phone _____

Work Address _____ City _____

Postal Code _____ Cell Phone _____

Email Address _____

Emergency Contact Information

Please provide two additional emergency contacts other than parents/legal guardians who would assume responsibility of your child in case of emergency.

*** will only be contacted in the event that the parents/legal guardians cannot be reached. ***

Contact #1

Name _____ Relationship to Child _____

Home Phone _____ Cell Phone _____

Contact #2

Name _____ Relationship to Child _____

Home Phone _____ Cell Phone _____

Authorized Pick Ups (In addition to the emergency contacts listed above)

***Please note: We will release your child to anyone listed below as an authorized pick up. If you choose not to have anyone additional pick up your child please check the box below. Under no circumstances will any child be released to anyone not known to East Plains Child Care staff without verbal or written authorization from the parent or guardian. Unknown persons will be asked to produce identification before the child is released to them.*

I prefer not to have anyone additional pick up my child.

Name _____ Relation to Child _____

Name _____ Relation to Child _____

Name _____ Relation to Child _____

I give the registered teachers of East Plains Child Care Centre consent to take my child on supervised walks outside the classroom and within the community.

Parent Name _____

Signature _____ Date _____

Program Requirements

Infant (4 Months- 17 Months)

Toddler (18 Months- 30 Months)

Preschool (30 Months- 3.11 Years)

2 days (Tuesday and Thursday)

3 days (Monday, Wednesday and Friday)

5 Days (Monday to Friday)

Payment Options

Monthly Credit Card Payments

By signing below I authorize East Plains Child Care Centre to automatically withdraw monthly child care fees from my credit card.

Cardholder's Name (as printed on card) _____

Visa/MC # _____ CVV _____ Expiry Date _____

Print

Signature

Date

Fee List

Infant

- \$72.00 Per Day - 2 days (Tuesday and Thursday)
- \$70.00 Per Day - 3 days (Monday, Wednesday and Friday)
- \$68.00 Per Day - 5 Days (Monday to Friday)

Toddler

- \$67.00 Per Day - 2 days (Tuesday and Thursday)
 - \$65.00 Per Day - 3 days (Monday, Wednesday and Friday)
 - \$63.00 Per Day - 5 Days (Monday to Friday)
- *No rate change if child is not potty trained**

Preschool

- \$62.00 Per Day - 2 days (Tuesday and Thursday)
 - \$60.00 Per Day - 3 days (Monday, Wednesday and Friday)
 - \$58.00 Per Day - 5 Days (Monday to Friday)
- *No rate change if child is not potty trained**

NoteChild Care fees will increase annually on September 1st. ***

Office Use:

First Date of Withdrawal: _____

Amount: _____

Payment applied to: _____

Staff Signature: _____

Medical Form

Please note: the information below is required as per the Child Care and Early Years Act

Child _____
Surname _____ First Name _____ Preferred Name _____
Date of Birth _____ Age _____ Gender [] Male [] Female
Month/ Day/ Year
Doctor's Name _____ Phone Number _____
Office Address _____ City _____
Postal Code _____

[] Photocopy of immunization record

Please note: As per the Child Care and Early Years Act, a child is required to have the immunizations indicated below by the Medical Officer of Health. If for some reason your child is not immunized exemption will need to obtain an affidavit indicating immunization conflicts with the sincerely held convictions of the parent's religion or conscious or a legally qualified medical practitioner gives medical reason in writing to the licensee as to why the child should not be immunized.

- Diphtheria
- Pertussis
- Tetanus
- Polio
- Haemophilus B
- Measles
- Mumps
- Rubella

Consent for Medical Treatment

While ever possible, effort will be made to reach the parents/guardians in the event of a medical emergency. Should East Plains Child Care Centre be unable to contact a parent or guardian, we require parental permission to authorize any doctor to give necessary treatment in the event of an emergency.

I hereby consent to medical treatment for my child in the event that emergency treatment is necessary due to accident, sudden illness, or other emergency situation as deemed necessary by any staff member. East Plains Child Care and staff are hereby released for any liability due to any circumstance resulting from medical treatment given.

Medical Information

Please list any allergies (IAP to be completed):

Please describe reaction to allergies:

Any Provisions to your child's diet:

Any past or current health conditions or special needs:

Has your child been exposed to any communicable diseases in the past, if so list:

Any regular medication required: (If so please fill out Medication Form)

Any rest/nap time special requirements:

Any exercise requirements or exemptions:

Permission to Photograph

I _____ give East Plains Child Care Centre permission to take
(Parent/ Guardian's Name)

my child, _____'s picture and post it in the centre, social
(Child's Name)
media or on their website for professional use only.

Parent Name (print): _____

Signature: _____ Date: _____

Statutory Holidays

- New Year Day
- Family Day
- Good Friday
- Victoria Day
- Canada Day
- Civic Holiday
- Labour Day
- Thanksgiving
- Christmas Day (closed at 12:00 pm)
- Boxing Day
- New Year Eve (closed at 12:00 pm)

Vacation Policy

Any time away from school will not be made up or discounted (full fees will be collected in order to hold your child's spot at our centre).

Sick Days

We do not provide discounts, make ups or additional days for time lost due to illness.

Inclement Weather Policy

East Plains Child Care Centre has the right to close due to inclement weather. Parents may be notified in the mornings before the centre opens or during operating hours.

Late Fees

I understand that a late fee is applicable when my child is picked up after closing (6:00 PM). Late fees will be charged to the credit card on file.

Late fees: \$10 for 1- 5 Minutes late
\$5 each additional minute after the 5th minute

About Your Child

Special fears or unusual habits: If yes, provide details

Previous Daycare/ baby-sitter experience:

Languages spoken at home or any language concerns:

Describe your child's personality:

Are there additional professionals involved with your child? (please specify):

What methods of behavioural control or redirection are used at home?

What is your child's response to the above method?

Parent Agreement Form

This agreement between

Parent/Guardian name

And

East Plains Child Care Centre,

- 1) Child care between 7 AM and 6PM for _____ days per week as prearranged, excluding days that the centre is closed due to statutory holidays or inclement weather.
- 2) The child shall be involved in a program of play and learning experiences, which are appropriate for the ages and abilities of the children in each group. A balance of active and quiet play is provided, with individual and group activities, which are geared toward the emotional, social, physical, aesthetic, and individual growth of young children.
- 3) The child shall be administered medication, upon written request of the child's parent or guardian. A medication form must be filled out, or medication can not be administered. The centre shall have no responsibility of any kind whatsoever, for failure to provide requested prescription or over the counter medication, nor adverse reactions which are caused by the administration of such medication.
- 4) The centre shall be provided appropriate first aid to an injured child. A parent or guardian shall be notified if it is the judgment of the centre staff the immediate medical attention is necessary. It is further the judgment of the school staff that the injury is of an emergency nature, appropriate emergency help shall be called to the centre and a parent or guardian shall be contacted.
- 5) A child who has become ill shall be given appropriate care until called for by parent or guardian or a designated representative. Any child sent home with a fever must adhere to the fever policy (please refer to the parent handbook).
- 6) The centre shall notify parents or guardians of suspected exposure to a communicable disease, as shall the parents or guardians notify the school.
- 7) The centre shall not be responsible for any personal belongings. (Please ensure all items coming into the centre are labeled.)
- 8) The Supervisor and any staff member shall report to the Children's Aid Society or local authorities as required by law, any suspicion of child abuse, sexual or otherwise, neglect, or endangerment of which they may become aware.

- 9) A receipt of payment will be issued at the end of each calendar year for income tax purposes.
- 10) No credit shall be given for days the school is closed due to statutory holidays or inclement weather.
- 11) Full fees must be paid if your child is absent, including illness and vacation time.
- 12) Late pick fees apply when a child is picked up after 6:00PM
- 13) An administration fee of \$45.00 is applicable to all NSF payments.
- 14) Late payment are subject to interest and other penalties (Please read all payment provisions in parent handbook.)
- 15) Fees are non refundable in the case of cancellations or changes after having secured a place for your child.
- 16) Fees will increase annually on September 1st.
- 17) The person bringing the child to the centre must inform staff members of their arrival so that the teacher may sign them into the program.
- 18) To notify the centre when someone other than themselves will be picking up the child. They should also notify that person that they will be asked for a piece of photo identification if they are not familiar to staff members. Anyone picking children up must be over the age of 18 years.
- 19) To see that the child is dressed appropriately and is furnished with extra clothing in their cubbies. In the event that a child has to change clothing throughout the day and they do not have extras, parents will be called to provide clothing for the child.
- 20) To notify the centre when your child is going to be absent for the day, and for what reason. Also notify the school if your child has had exposure to a communicable disease.
- 21) To give 30 days written notice to the school when withdrawing from the program. Failure to do so will result in a charge equal to one month's fees.
- 22) To respect the non-religious nature of this program.
- 23) To treat all staff members with respect.
- 24) To refrain from reprimanding the children of other families while on school premises.
- 25) To read the Parent Handbook prior to registration

This agreement shall be terminated if any one or more of the following occur:

- 26) Failure of parent or guardian to honor obligations listed in this agreement or in any rules, regulations, or manual provided by the centre.

27) The parent or guardian of the child allows their account to become delinquent.

28) The centre, in its sole and unfettered discretion, determines that it is not in the best interest of the school or other children enrolled at the school to have the child in attendance.

By signing below you must comply with the policies outlined here and in East Plains Child Care Centre Parent Handbook.

Parent Signature _____ Date _____

Parent Signature _____ Date _____

Supervisor Signature _____ Date _____