



MID-SUN COMMUNITY CHILD CARE
MIDNAPORE REGISTRATION FORM 2018/2019 (3.2.b)

Updated: March 27, 2018

Commencement Date: Sept 4, 2018 Termination Date: *\$75.00 Registration Fee: (Date paid)

*Component Required: Before After Both - Grade 1-6 (Before Care at Mid-Sun only, open to both programs)

* requirements of registration

*Child's Legal Name: first name last name *Also Known As: name by which child is commonly known as

*Address: Must be legal land description. *Postal Code:

*Home Phone #: *Date of Birth: Year / month / day

*School: Midnapore *Grade: English Mandarin

*Mother's Legal Name: first name last name *Father's Legal Name: first name last name

*Address: Must be legal land description. *Address: Must be legal land description.

*Mother's Phone #: Home- *Father's Phone #: Home-

*Work- *Work-

Cell- Cell-

*Email: *Email:

*Persons authorized to pick up child (if for any reason you should not want your child to leave with a particular person, please indicate, legal documents may be required).

Alternate Emergency Contact: (Must be someone other than a parent and reside in Calgary)

*Name: first name last name *Address: Must be legal land description.

Relationship:

* Cell Home Phone #:

Health Care Information:

*Allergies: YES NO If YES please list:

*Does your child take any ongoing medication or have any special needs, such as diet, rest or exercise requirements for medical or other reasons:(ex- Inhaler for Asthma, Epi-Pen/ Benadryl for Allergies, Vegetarian)(2.2.1) YES NO If YES please list:

*Does your child have a history of serious illness? YES NO If YES please list:

*Are your child's immunizations up to date? YES NO

The information given on this form is true and correct. Registration Fee Non-refundable/Non-transferable

Date

*Parent signature



MID-SUN COMMUNITY CHILD CARE PERMISSION/RELEASE FORMS

***Accident Policy**

If a child has an accident and is seriously injured while attending the Program: The Mid-Sun Community Child Care Program will:

- Call 911;
- Contact the parent or the child's emergency contact immediately after calling 911; and
- Report the injury to Child and Family Services Authority

*Parent/Legal Guardian Signature

Date

Permission authorizing that a Child may leave the program Unaccompanied by an Adult

I/We authorize my/our child, _____ to leave the Out of School Care Program UNACCOMPANIED BY AN ADULT when instructed to do so by _____. I agree to release from liability the Mid-Sun Community Child Care from any illness, injury or accident occurring at this time.

Parent/Legal Guardian Signature

Date

Permission authorizing that a Child may walk to and from school Unaccompanied by an Adult

I/We authorize my/our child, _____ to walk to and from school UNACCOMPANIED BY AN ADULT before and after school and when the child is required to stay after school or go to school before regular start/dismissal (i.e. detention, intramurals, patrols, etc.).

Parent/Legal Guardian Signature

Date

Media Consent (3.2.g)

I give permission to Mid-Sun Community Child Care to take my child's, _____ photograph, display their art work and take video recordings for program use only and promotional reasons within the program (examples- photo album to show new families) and documentation purposes in perpetuity. Photos will not be posted on any form of social media.

Parent/Legal Guardian Signature

Date

Sharing Of Information (3.3.f)

Yes. I, _____, give consent to the Mid-Sun Community Child Care to share child-specific information with relevant stakeholders (example- Midnapore School) and understand that a record will be maintained of the information shared where applicable.

Would you like to receive occasional updates from Mid-Sun Community Association by E-Mail?
(You will receive updates in regards to registration dates, community events, community news, etc...)

YES NO



MID-SUN COMMUNITY CHILD CARE PARENT FEE AGREEMENT

*Parent Fee Agreement	*Parent Initial
The monthly fee of \$ _____ is due on the 1 st of each month and will be automatically processed.	
Payment Method Included: <input type="checkbox"/> Post Dated Cheques <input type="checkbox"/> Credit Card <input type="checkbox"/> Subsidy <ul style="list-style-type: none"> Some form of payment method is required to be on file to complete registration Families must notify the Program of any fee splitting. Joint-parenting families must fill out and sign a fee payment form- parents must alternate months, no splitting of monthly fees It is the responsibility of the parent to update payment information 	
Parent name requested on tax receipts (only 1) _____ <ul style="list-style-type: none"> We will not be able to change this once it is in the computer or change it retro-actively <li style="background-color: yellow;">Receipts will be emailed through Max Galaxy, please retain for tax purposes If tax receipts need to be emailed again, there will be a \$25 charge If tax receipts are requested to be printed, there will be a \$5/ sheet of paper charge 	
Monthly Fees Per Child Morning Care \$135.00 – located at the Mid-Sun Community Center only After Care \$350.00 – \$40.00 surcharge for non-school days* Before & After Care \$485.00 – includes non-school days, except Spring/Easter Break where surcharges apply Kindergarten \$785.00 – includes non-school days and Spring/Easter Break- located at the Mid-Sun Community Center, fees are not pro-rated for holiday breaks Morning Care \$15/ drop in – located at the Mid-Sun Community Centre only	
<ul style="list-style-type: none"> One month's written notice of withdrawal or change in components is required, dated the 1st of the month. All schedule changes will take place on the 1st of the month. Failure to notify the Program prior to August 1st that your child will not returning in September will result in a charge for September fees. A charge of \$20.00 will be applied to any NSF cheque or failed credit card charges. Families must notify the Program of any change of payment method in writing. Families must supply their Subsidy Approval Notice to the Program. Deposit may be required. There will be no pro-rating of monthly fees to accommodate holidays, sick days or other absences. There will be no pro-rating of fees for program closers due to strike, natural disasters, power outages, or any other program closures. Families with delinquent accounts will be given 5 working days' notice to clear up outstanding balances or childcare will be terminated. Finding and the cost of alternate care is the parent's responsibility. 	
Late Fee/ No-Show Policy <ul style="list-style-type: none"> \$1/ minute for before 7:00am or after 6:00pm \$10 for failure to notify the program of any child/ern absences from the Program 	

If at any time you have concerns or questions regarding your fees, please approach the Program Director/ Manager as soon as possible.

*Parent/Legal Guardian Signature

Date

Program Director Signature

Date