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REGISTRATION FORM

Registration fee (non-refundable) - \$35.00

Child's Nickname: _____

Child's Name : _____

D.O.B: _____ Age: _____ Start Date: _____

Parent's E-mail I.D.: _____

Address: _____

Parent/Guardian Information

1. Name: _____

Relationship to Child: _____

Address: _____

Phone Number: _____

Place of Employment: _____

Work Phone Number: _____

2. Name: _____

Relationship to Child: _____

Address: _____

Phone Number: _____

Place of Employment: _____

Work Phone Number: _____

Parents with custody of the child, please list any agreements: _____

Emergency Contact Information (mandatory)

1. Name: _____

Cell #: _____ Home #: _____

Work #: _____

Address: _____

Relationship to Child: _____

2. Name: _____

Cell #: _____ Home #: _____

Work #: _____

Address: _____

Relationship to Child: _____

Medical Information

Name of Physician: _____

Physician Phone #: _____

Alberta Health Care #: _____

Immunization up to Date: Yes No

Date of last Immunization: _____

Any allergies, regular medication, chronic condition etc: _____

Recommendation/Emergency Instructions:

Arrival and Pick-Up Information

Time of Arrival: _____

Pick-up Time: _____

Authorized People Information

Authorized People to whom the child maybe released:

Name: _____

Phone #: _____

Relationship to the child: _____

Name: _____

Phone #: _____

Relationship to the child: _____

Name: _____

Phone #: _____

Relationship to the child: _____

Name: _____

Phone #: _____

Relationship to the child: _____

Bus Information

Bus Service Required: Yes No

Child's Personality

Please answer the following questions to help us understand your child's needs and interests.

- 1. Favourite Activities: _____

- 2. Fears (if any): _____

- 3. Dislikes: _____

- 4. Reaction to stress: _____

- 5. Previous Daycare/Day home (if any): _____

- 6. Sleep pattern: _____

- 7. Physical Goal: _____

- 8. Personal Goal: _____

- 9. Pets (if any): _____

- 10. Anything else that you would like us to know about your child/children: _____

MEDICAL CONSENT FORM

In case of an accident and/or illness and unavailability of the parent, we need permission to be able to:

- o Yes/No _____ Contact the child's physician or if the physician is not available either, to be able to contact another physician for the purpose of administering the necessary treatment to your child.
- o Yes/No _____ Be transported by ambulance, if required and ready to pay the ambulance fee.

Parent/Guardian Signature

Dated

FIELD TRIP PERMISSION FORM

As a part of our regular programming, we will be taking various walking trips off the premises, within the neighborhood. The consent form below will give us more flexibility and allow for more spontaneity in our planning. We will continue to have you provide consent forms for any motor transportation trips.

I, _____ give my permission for my child or children namely, _____ to be able to participate in the walking trips off the premises of the Future scholars Daycare & OSC.

Parent/Guardian Signature

Dated

PERMISSION TO PHOTOGRAPH/VIDEO

I give permission to Daycare Future scholars daycare or my child _____ to be interviewed, photographed, video recorded, to have their artwork and original creations displayed within the centre, and to have their allergies/ medications posted within the centre. These would be for general use and to be displayed ONLY within the boundaries of the Centre.

Parent/Guardian Signature

Dated

Future Scholars Sunscreen and Insect Repellent Permission Form

During outdoor play on sunny days, especially during the months of April through September, it is necessary that children wear sunscreen to protect their skin from the sun's damaging rays. **Therefore, we require that YOU provide your children with a sunscreen of SPF 30 or higher.** All sunscreen will be applied to the child's face (not near eyes), ears, nose, arms, legs, or any other exposed skin before going outside and reapplied when necessary. Future Scholars will apply sunscreen **ONLY** if provided by parents.

Because there are periods during the year where mosquitoes and other biting insects are present, you may also want to send your child with a bottle of insect repellent. Repellent will be applied at the same time as sunscreen, but it is not a requirement of the centre. Please choose a bug spray with low DEET content and that is sensitive to a child's skin. In the absence of repellent, the centre will not provide any.

All sunscreen and insect repellents must be marked with the child's name and be in the original packaging with an appropriate expiration date. Anything that is past the expiration date will not be used. Parents will be notified when these products expire or are running low.

Please fill out the following information and place a checkmark next to the appropriate statements.

I, _____ understand the above and give Future Scholars Daycare staff permission to apply sunscreen that I have provided and labelled to my child/ren (Name) _____

_____ I do not know of any allergies that my child has to sunscreen.

_____ I do not want my child to have sunscreen applied to him/her because of an allergy or other medical condition. Please specify:

I, _____ give permission for the centre staff to apply insect repellent that I have provided and labelled to my child/ren,(Name)

_____ I do not know of any allergies my child has to insect repellent.

Signature of parent: _____ Date:

TRANSPORTATION AGREEMENT

- It is the responsibility of the parent to arrange all bus transportation information and provide it to **Future Scholars Daycare & OSC**
- The cost of this service is the sole responsibility of the parent
- If your child will not be on the bus or arriving in the morning to take the bus, it is the parents responsibility to inform the Future Scholars Daycare staff prior to the arrival of the bus
- In the event of delays in the bus arrival time, the parents must inform the bus company themselves if they wish their child to remain on the bus until a staff person is able to walk out to the designated bus stop.

Parent/Legal Guardian is responsible for transporting your child to and from the childcare facility. The childcare facility will transport your child to and from school by walking, Van, and or waiting at the bus stop.

We carry a notebook with copies of all Emergency Contact Information, and record of pick up and drop off times and first aid kit. If a child does not show up when expected then the school is first to be checked, daycare contacted and then parents. If the child is still not located, then the appropriate authorities are contacted. A Critical/Serious incident report is filed and the licensing officer is notified immediately. Note-Staff will not leave the place until the child is found or a proper step taken. Maybe in this case all other children may arrive late at daycare too and parents will be informed at the end of the day.

We are in partnership with the schools and check each school's protocol. When being transported in our company vehicle, children are only to be released to the outside supervisors on the school grounds. Daycare keeps records regarding who goes to which school, where the child gets picked up, start time and end time, days off, and emergency information for each child. School Calendars are kept to establish Pd days, Staff Meeting holidays. etc.

I, _____ {Parent's Name} give permission for my child to travel in a moving vehicle or walked to and from school / Taken/Pick up at the designated Bus Stop with Future Scholars Daycare and OSC

Child's name: _____

Parent/Legal Guardian: _____ Date: _____

In case of an emergency, for example, our company vehicle breaks down, we give permission for staff to transport my Child in their own personal vehicle.

Yes Or No (please circle)

Parent Initial

*If NO, then parents will be called to transport their child to their school

ADMISSION POLICY/AGREEMENT

- A **\$35.00 registration fee** is payable upon confirmation of placement to ensure the space for your child.
- Monthly fees are payable on the first day of each month in full. Monthly fees paid after the fifth day of the month will be assessed a "Late Fee Penalty" (unless other arrangements have been made with the director) of \$40.00.
- Please ensure cheques are made payable to **Future scholars Daycare.**
- We request that your child be dropped off no later than 10 :00 am. This is for staffing purposes. Special circumstances always arise and if these circumstances occur, please make arrangements with the director so she may plan for staffing.
- Please notify the daycare staff immediately when there are any changes with current address, telephone numbers, and change of employer, emergency contacts, or immunizations.
- As the daycare operates on a monthly budget with expenses that are incurred regardless of whether or not a child is present, we cannot give credit for absences due to illness or holidays.
- If your child will be absent on any day, please let the day care know for staffing and ratio purposes.
- If you are unable to be at the center by 6:00pm please call the center so that arrangements can be made with the staff. Late fees will take effect \$1 per minutes .
- Provide a complete change of clothes. (Socks included) that are labeled with your child's name. Inside shoes are also required.
- Sign the medication book for any medications that your child will require for that day. The medication will not be administered if the form has not been filled out completely with your child's name, exact dosage, time to be administered, date, name of medication and your signature. Medication needs to be signed in daily. If the medication is ongoing, a special form will need to be filled out by the parent with all the same necessary information. If your child has received medication prior to coming into the daycare please ask for the Communication Book to write down the type of medication and the dosage the child received before arriving at the center so the staff is aware that the child was or is still sick.
- Provide permission (preferably in writing) if another person is to pick up your child. Children will not be released to anyone not authorized by the admitting parent.
- We require notification of any changes of the custody, guardianship or care and control of your child. A copy of any agreement or court order pertaining to those matters is to be left with the center. This will assist us in ensuring that your child is released only to an authorized person.
- Future Scholars Daycare believes if a child is too sick to go outside, participate in daily activities or go to school (if applicable) then they are too sick to be at the center.
- Future scholars Daycare and staff will not be responsible for lost or broken toys that your child has brought from home. We ask that you leave your child's toys at home. *Every Friday of the month will be "Show and Tell" day.* On this day, your child may bring one toy from home. Please remind your child that they will be asked to share their toy.
- Future scholars Daycare requires a written notice thirty (30) days prior to you withdrawing your child.
- I/We hereby certify that I/We have read, fully understand and agree as stated in the Parents/Guardian Handbook for Policies and Procedures of Future scholars Daycare.

Your signature at the bottom of our admission policy indicates your willingness to comply with our regulations with the understanding that this agreement may be cancelled at any time by the center only if it is in the best interest of the child and the center.

SIGNATURE OF PARENT/GUARDIAN

DATE

MEDICAL CONSENT CARD – (Child file)

Child: _____ D.O.B. _____

Child's Address: _____

Parent 1: _____ Home #: _____

Cell #: _____ Work # _____

Parent 2: _____ Home #: _____

Cell #: _____ Work # _____

Parent address if different than above: _____

Work address: _____

Alberta Health Care #: _____

Emergency Contact Person: _____ Phone # _____

Emergency Contact Person's Address: _____

Relevant health information: _____

My child's immunizations are up to date ___Yes___No

Does your child have a potential life threatening allergy? ___Yes___No

If so, have you filled out the Anaphylaxis Emergency plan form? ___Yes___No

Does your child require health care (additional to giving medication)? ___Yes___No

If so, have you filled out the specialized medication form? ___Yes___No

In the event of an emergency when I cannot be reached, I give my permission for medical procedures deemed necessary by my Doctor, or by any physician selected by the Future scholars Daycare. I agree to compensate this centre for the cost of any such medical assistance obtained. Presentation of this card as signed by you, the parent, or other legal guardian, gives consent for your child to receive medical assessment and treatment as deemed necessary.

_____ Date

_____ Signature of Parent or Legal Guardian

EMERGENCY CARD – (Portable Record)

Child: _____ D.O.B. _____

Child's Address: _____

Parent 1: _____ Home #: _____

Cell #: _____ Work # _____

Parent 2: _____ Home #: _____

Cell #: _____ Work # _____

Parent address if different than above: _____

Work address: _____

Alberta Health Care #: _____

Emergency Contact Person: _____ Phone # _____

Emergency Contact Person's Address: _____

Relevant health information: _____

My child's immunizations are up to date ___Yes___No

Does your child have a potential life threatening allergy? ___Yes___No

If so, have you filled out the Anaphylaxis Emergency plan form? ___Yes___No

Does your child require health care (additional to giving medication)? ___Yes___No

If so, have you filled out the specialized medication form? ___Yes___No

In the event of an emergency when I cannot be reached, I give my permission for medical procedures deemed necessary by my Doctor, or by any physician selected by the Future scholars Daycare. I agree to compensate this centre for the cost of any such medical assistance obtained. Presentation of this card as signed by you, the parent, or other legal guardian, gives consent for your child to receive medical assessment and treatment as deemed necessary.

_____ Date

_____ Signature of Parent or Legal Guardian