

**Child's Name:**

**Parent's Name:**

**Attending:** [ ] Monday [ ] Tuesday [ ] Wednesday [ ] Thursday

**IMPORTANT:** Please attach a current photo of your child

Please ensure that everything listed below has been filled out and submitted BEFORE your child's start date.

### **General Information**

- Child's Information including Medical
- Family Information and Contacts
- Immunization Records (attach)
- Emergency Contacts
- Release of Children
- Fee Agreement
- Photo Permission
- Field Trip Information
- Fundraising Option Acknowledgement
- VICPA Application

### **Duty Parents**

- Criminal Record Check
- Character References

### **Cheques**

- Registration Fee \$145 (cheque payable on registration date)
- 2x \$150 fundraising cheques (postdated to Dec. 1<sup>st</sup> and June 1<sup>st</sup>)
- Tuition Fees (postdated to the first of each month)

# Vancouver Island Cooperative Preschool Association

## Standard Enrolment Form for Sidney Preschool & Childcare

### CHILD'S INFORMATION

|   |   |
|---|---|
| Child's Full Legal Name:  | Birth Date (mm/dd/yyyy):  |
| Name Child Responds To:   | Sex:    Male    Female    Other                                 |
| Languages Spoken at Home:   | Enrolment Date:   |
| Hours Child Will Attend Preschool:<br>(Please Circle)<br><br>Monday 9-1<br>Tuesday 9-1<br>Wednesday 9-1<br>Thursday 9-1 | Home Address:   |
| Medical Insurance Plan (MSP) Number:  | Medications Taken Regularly:                                    |
| Family Physician Name:<br><br>Phone:  | Child's Dentist Name:<br><br>Phone:                             |
| Child's General Health:<br><br>[ ] Good [ ] Fair [ ] Poor   | Please list any known health problems/<br>medical disabilities: |
| Serious Illness/Injuries (past and current):  | Dietary Restrictions:   |

**FAMILY INFORMATION**

|                        |                |
|------------------------|----------------|
| Parent/ Guardian Name: | Home Phone:    |
| Home Address:          | Place of Work: |
| Cell Phone:            | Work Phone:    |
| Email address:         |                |

|                        |                |
|------------------------|----------------|
| Parent/ Guardian Name: | Home Phone:    |
| Home Address:          | Place of Work: |
| Cell Phone:            | Work Phone:    |
| Email address:         |                |

Has the child had any previous experience away from home? (Preschool, Daycare, Play Groups etc.)

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Languages Spoken at Home:

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Please List Any Important People in Your Child's Life (siblings, grandparents etc.), as well as some of your Child's likes and dislikes (activities, toys, foods, anything to help me get to know them):

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Please use this space for any additional information about your child or family you feel is important: (skills you're working on at home, potential developmental delays, special needs etc.)

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Have you been a member of a VICPA or another co-op preschool? If so, where and when?

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### **IMMUNIZATION RECORD**

- My child has received immunizations

**Please attach immunization record**

- I choose not to have my child participate in the province's immunization program

## **EMERGENCY CONTACTS**

It is VICPA policy to notify the parent/guardian if a child is ill or requires medical attention. If the preschool is unable to contact the parent/guardian and the child needs immediate medical help, parental consent is necessary for facility staff to take appropriate action on behalf of the child. Your consent will accompany the child to the emergency service.

I authorize the staff at Sidney Preschool & Childcare to call a physician, take my child to the nearest emergency centre or summon an ambulance for emergency medical aid should the person(s) in attendance feel such services are required and I cannot be contacted by phone. If such an emergency should arise, I shall be notified as soon as possible. I agree that any cost incurred for such services shall be the sole responsibility of myself.

If I cannot be reached, please contact:

### **1<sup>st</sup> Contact/Pick Up**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to the Child: \_\_\_\_\_

### **2<sup>nd</sup> Contact/Pick Up**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to the Child: \_\_\_\_\_

### **3<sup>rd</sup> Contact/Pick Up**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to the Child: \_\_\_\_\_

**Parent/ Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## RELEASE OF CHILDREN

Some parents may require other individuals to pick up their children from preschool during the program year (e.g. nanny, grandparent, family friend). I \_\_\_\_\_ authorize the Sidney Preschool & Childcare (Early Childhood Educator or ECE substitute responsible in the school) to release my child, \_\_\_\_\_ to the following adults. I understand that every effort will be made to contact me first.

**AND**

### Emergency Release

In the event of an emergency or other major disaster, I \_\_\_\_\_, authorize Sidney Preschool & Childcare (Early Childhood Educator or ECE substitute responsible in the school) to release my child, \_\_\_\_\_, to the following adults. I understand that every effort will be made to contact me first.

| Name: | Address: | Phone Number: |
|-------|----------|---------------|
|       |          |               |
|       |          |               |
|       |          |               |
|       |          |               |

Parent/ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Is there a written agreement or order with respect to the custody of your child?

[ ] Yes [ ] No      If yes, a copy must be attached.

**Under no circumstances is my child to be released to the following person(s):**

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## **PROGRAM INFORMATION**

### **Full Participation**

Parents help out in the classroom approximately once a month, working alongside the ECE. This can be a rewarding experience for both parent and child. Parents attend 90-minute mandatory monthly business meetings and parent education sessions. These are held in the evenings and children are not permitted to attend. Parents hold a volunteer job that helps with the operation of the preschool.

### **Partial Participation**

No classroom helper days are required. Parents attend 30-minute mandatory monthly business meetings and are encouraged to attend our parent education session that immediately follows. Parents hold a volunteer job that helps with the operation of the preschool.

\*We do fundraising all year long and although parents are encouraged to participate, there is an option to opt out of fundraising.

## **Fee Structure and Schedule Options**

### **Twice per Week**

*Mondays/Wednesdays OR*

*Tuesdays/Thursdays*

Full Participation fees: \$190.00

Partial Participation fees: \$250.00

### **Four times per week:**

*Monday through Thursday*

Full Participation fees: \$340.00

Partial Participation fees: \$450.00

### **Child Care Option**

This program will only be offered if there are enough children enrolled in it. Our six hour child care program combines our preschool program with an added two hours and twenty minutes in the afternoons for a full day from 9 am to 3:15 pm.

Children will begin in the busier **Sea Stars Program** and end the day with **Chickadees**, a quieter, more low-key afternoon program. Our afternoon starts with an extension of our outdoor play time and includes a shared buffet snack, a rest or nap (if desired), an opportunity to continue projects started in the morning, and small group play, and activities based on the children's interests. This class is led by our ECE and there is no parent participation in the afternoons.

Fees for the Chickadees program are as follows:

Two Days per Week: +\$120.00

Four Days per Week: +\$240.00

## **Jobs**

Depending on enrolment, the types and number of jobs can change. The following is a list of jobs that are an integral part of the preschool in addition to the executive positions.

**Set up and put away:** Every Sunday the preschool must be set up for the week ahead, and on Thursday all must be put away into our storage. This is a job that is shared among several families.

**Parent Education:** Plan and book monthly parent education speakers

**Laundry:** Each week we accumulate laundry (towels, costumes, etc.) that must be done.

**Playdough:** New playdough is needed regularly (especially during cold and flu season)

**Recycling:** On Thursdays, the week's recycling must be removed from the premises and recycled.

**Scholastic:** Sort and distribute catalogues and manage orders

**Shopper:** Any shopping that is needed for the preschool

**Equipment:** Maintain, order, and acquire any new equipment needed for the school

**Social Media:** Maintain our presence on Facebook and other internet sites

**Emergency/ First Aid Kits:** Ensure that all emergency kits and equipment is up to date

\*\* Some jobs are more time consuming than others. We all do our part to ensure the smooth, efficient running of the school so that our children have a wonderful place to learn and grow.



## FEE AGREEMENT

I understand and agree that:

1. The registration fee shall be paid when the application for your child has been accepted. The fee is non-refundable.
2. The monthly tuition fee shall be paid in the following manner:
  - Ten (10) post-dated cheques to cover the remaining tuition (September-June) are to be given to the Treasurer at the September General/Orientation Meeting.
  - Spots are guaranteed only if post-dated cheques are provided for the childcare program.
  - All families entering mid-year will pay the registration fees, the entering month's fees, and provide post-dated cheques for all remaining fees through to June, to the Enrollment/Orientation Officer at the time of enrolment.

**Students are not accepted into class until all fees are paid as outlined above.**

3. Some families may qualify for financial assistance (i.e., childcare subsidy) offered through the Ministry of Children and Family Development. Contact the Treasurer or ECE for more information. **Please apply for childcare subsidy as soon as possible** (i.e., in August), as it can take several weeks for your approval. At the end of the day, however, **you are responsible for paying the tuition fees for your child (in the event that you are not approved for subsidy).**
4. Those families who are either on or applying for social assistance must submit all cheques, and registration fees before the child starts school. These charges will be reimbursed once money is received from the Ministry of Social Services.
5. Cases of hardship (e.g., due to illness, strike, etc.) shall be reviewed by the Executive on an individual basis. Postponement of the monthly tuition fee may be considered for a limited period of time depending on the financial status of the Preschool.

I, the undersigned, agree to abide by the rules laid out above:

**Parent/ Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/ Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## PARENT RELEASE FORM FOR MEDIA RECORDING

May we take photos of your child to:

- Put on the walls in the classroom? [ ] Yes [ ] No
- Share in a PRIVATE group (or app), where only staff and parents attending Sidney Preschool will be able to view them? [ ] Yes [ ] No
- Post on our PUBLIC Facebook Page or Website? [ ] Yes [ ] No

Parent/guardian signature \_\_\_\_\_ Date \_\_\_\_\_

### FIELD TRIP INFORMATION

All parents driving for school field trips are responsible for ensuring cars are in good repair and have seat belts for the driver and all passengers, are in possession of a valid driver's license, and have a **minimum** of \$1,000,000 liability insurance, however \$2,000,000 is recommended.

Every reasonable precaution must be taken to ensure the safety of students. This includes making sure the children are properly seated in rear seats only, that seat belts or child restraints are properly used and adjusted, with only 1 child per seatbelt. Any field trip will have a minimum adult – child ratio of 1 to 2. Any increase in the numbers of parent helpers is up to the discretion of the ECE. The factors affecting the ECE's decision are: area, place, type of activity, mode of transportation, and ages of children.

Parents will be notified of all field trips involving vehicles. Some field trips will require the parents to drive their child to and from the site of the activity or arrange carpooling. In this case, the preschool session will begin and end at the site of the field trip. If the preschool is arranging drivers, the parents will be notified which drivers have which children. Drivers should be reminded that medication can have adverse effects on driving ability.

Will you be able to drive? [ ] Yes [ ] No

Supervise? [ ] Yes [ ] No

Do you have \$1,000,000 or more liability insurance? [ ] Yes [ ] No

Will you allow your child to go on spontaneous **walking** excursions? [ ] Yes [ ] No

How many children can you have seat belted in your vehicle, excluding the front seat? \_\_\_\_\_

I give permission for my child \_\_\_\_\_ to participate in class field trips as outlines above.

Parent/ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## FUNDRAISING OPTION ACKNOWLEDGEMENT

I/We \_\_\_\_\_ acknowledge that I/we have received/read the “Sidney Preschool and Childcare Fundraising Policy”.

I/We choose to participate in the following fundraising option:

- Participate fully in all fundraising events:
  - **I/We will fundraise and attend BOTH the December fundraising event and the Spring Fundraiser**
  - I/We will participate, as much as possible, in all minor fundraisers (e.g. Movie nights, Thrifty food Smile Cards, Scholastic book orders, Purdy’s chocolates, etc.)
  - I/We have provided two post-dated cheques for \$150 each (dated December 1<sup>st</sup> and May 1<sup>st</sup>).
    - I/We understand that if we do not attend the December event, the cheque dated December 1<sup>st</sup> will be cashed
    - I/We understand that if we do not attend the Spring Fundraiser, the May 1<sup>st</sup> cheque will be cashed
  - Please note:
    - Families who participate in the events will have their post-dated cheques destroyed (not cashed)
    - Requests for special consideration, if you cannot attend the event, will be considered by the Fundraising Chair
  
- Opt out of fundraising
  - I/we choose to opt out of all fundraising activities by paying \$300 in lieu of fundraising (this amount is addition to the standard LPP&C membership fees)
  - I/We will provide the preschool with a \$300 cheque payable by October 1<sup>st</sup> of the respective year
  - This payment is eligible for a tax receipt and is non-refundable
  - I/We understand that my family members are welcome to participate in any of the preschool fundraising events if I/we choose, simply for the social aspect/sense of community.

**Parent/ Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**VANCOUVER ISLAND COOPERATIVE PRESCHOOL  
ASSOCIATION**

P.O. Box 35034 Hillside P.O.  
Victoria, BC, V8T 5G2  
Phone & Fax: 250-598-2667

**MEMBERSHIP APPLICATION FORM**

Due to changes in the Societies Act, it is not longer possible for preschool members to automatically become members of the VICPA. Please complete the following application and return to your preschool Enrollment Officer as soon as possible in order for your preschool to remain a member in good standing with the VICPA.

I/we \_\_\_\_\_, as \_\_\_\_\_  
Your name(s) Parent(s) or Guardian(s)

at **Sidney Preschool & Childcare**, a group member in good standing in the Vancouver Island Cooperative Preschool Association (VICPA), hereby apply to be an individual member in the VICPA.

\_\_\_\_\_  
Signature(s) Date

**ENROLMENT FORM FOR VICPA**

Occasionally projects arise within the Association requiring specific skills. Just as your preschool benefits from its' members' talents, so can our Association of preschools. Understanding the busyness in your lives, please consider the many suggested areas below and **circle** the ones of interest and/or expertise and denote which parent in the space provided. Also, please feel free to offer any skills that have not been listed.

Name(s) (please print): \_\_\_\_\_

Date: \_\_\_\_\_

Preschool: **Sidney Preschool**

Home  
Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Most convenient time to reach you:  
\_\_\_\_\_

Are you a returning parent? Yes No

If yes, how many years have you been with a VICPA Co-op? \_\_\_\_\_

Do you know who, or what VICPA is? Yes No

Accountant(CA / CGA / CMA) \_\_\_ Bookkeeper \_\_\_ Carpenter / Trades (please specify): \_\_\_\_\_  
Calligraphy \_\_\_ Media (Radio, TV, Newspaper, Magazine) \_\_\_ Advertising / Public Relations \_\_\_  
Health Professional (please specify): \_\_\_\_\_ Making Tomorrow Conference \_\_\_ Lawyer \_\_\_  
Computer (please specify): \_\_\_\_\_ Organizational / Managerial Skills \_\_\_ Publishing \_\_\_  
Hiring / Salary Negotiation \_\_\_ Drama / Actor \_\_\_ Sewing \_\_\_ Graphic Artist \_\_\_ Others(please  
specify) \_\_\_\_\_

## Vancouver Island Cooperative Preschool Association - VICPA

**PARENTS' AGREEMENT FORM** for Sidney Preschool & Childcare a member school of V.I.C.P.A. for the school year  
2013/2014.

We, the undersigned have read carefully the Constitution and By-Laws of Sidney Preschool & Childcare and agree to abide by  
it.

1. When acting as a duty-parent/caregiver, I agree to arrange to arrive 20 minutes before preschool opening and to stay for 20 minutes after preschool dosing. So that both my child and I may get the most out of this very special day, I will not bring any other children to the preschool. If I cannot be present, I will trade duty days with another parent/caregiver and notify the necessary people, i.e., ECE, class rep, duty scheduler.
2. We will make every effort to be **prompt in bringing and picking up** our child for preschool and daycare.
3. We will not send our child to school or childcare if the child is ill, nor will we come as duty parents when we are ill. If our child contracts a communicable disease or condition (e.g., chicken pox, head lice, etc.) we will notify the ECE/Supervisor immediately.
4. We understand that, in the school room and on the playground, the ECE has overall responsibility for the program, teaching methods, discipline and health and safety measures; on a duty day, the parent/caregiver is there as the ECE's assistant.
5. We hereby authorize the ECE to:
  - a) Arrange for periodic examinations by public health personnel; b) Send our child home, if we are unable to pick him/her up, accompanied by an adult approved by us, if he/she appears ill, when it has been ascertained there is someone there to receive him/her; c) In case of serious injury or other medical emergency, to obtain professional help (family doctor and/or ambulance) and notify the parents/caregivers immediately. We agree that any cost incurred for such services shall be the sole responsibility of ourselves. If parents/caregivers cannot be reached contact is then made with the person whose name appears as an alternate on the enrollment form, and emergency form; d) To exercise discretion to ensure the safety and well-being of our child.
6. We will keep the ECE informed of any event or change of routine at home that may affect our child's behavior.
7. If we have questions about our child's progress or the program of the preschool, we will direct them to the ECE; we will direct queries or suggestions about the administration of the preschool to the executive through the President or Personnel Committee.
8. **We will pay our child's tuition fees according to procedures adopted by the preschool/childcare.**
9. If it becomes necessary to withdraw our child from school, we will give one month notice in writing to the Secretary, or pay one month's dues in lieu of notice. We understand that in some circumstances, registration fees are non-refundable as outlined in the Preschool Constitution and/or enrollment policy.
10. **TO BE A FULLY COOPERATIVE MEMBER OF THE PRESCHOOL/CHILDCARE, WE WILL SERVE ON THE EXECUTIVE, ON A COMMITTEE, OR TAKE ON A JOB(S), AND TO ASSIST IN GENERAL UPKEEP AND THE FUNDRAISING FOR THE PRESCHOOL/CHILDCARE.**
11. We undertake to attend all **MONTHLY MEETINGS**, held on the 2nd Monday of each month at 7:00 p.m. for the purpose of conducting the PARENT EDUCATION PROGRAM. **(Participation in an ongoing Parent Education Program is a requirement to maintain compliance with Community Care Facility Act, Child Care Licensing Regulation).** We understand that the presence of one duty parent/caregiver per family is required at every meeting, **and that our family will be asked to withdraw from the preschool group if more than two meetings are missed.** We are aware that telephone contact with the secretary is necessary in the event of an unavoidable absence and that the posted minutes of the meeting must be read and signed and **Parent Ed must be followed up as per VICPA Standards.**
12. We will take an active interest in the Vancouver Island Cooperative Preschool Association (V.I.C.P.A.).

13. We understand that in accordance with the **Child Care Licensing Regulation** as a duty parent/caregiver we are required to have on file the written opinion of a medical practitioner that our mental and physical health is adequate for the job. A form letter from the V.I.C.P.A, is provided to the duty parent/caregiver for the Medical Practitioner's signature. **We may not serve as duty parents in the classroom until this form has been presented to the Enrollment & Orientation officer and kept on file at the preschool.**

**If the local Medical Health Officer in your community does not require a T.B. (tuberculosis) test then disregard item 14.**

14. We understand that in accordance with the **Child Care Licensing Regulations**, it is compulsory for the regular duty parent/ caregiver born or raised in countries where tuberculosis is endemic, to have a TB test that proves they do not have active tuberculosis A copy of the results of this test must be presented to the Enrollment & Orientation officer and will be kept on file at the preschool. This process must be completed before the parent/caregiver begins the first duty day.

15. We agree to make every effort to present the forms for items 13 and 14 at the time of registration **THESE FORMS ARE LICENSING REQUIRMENTS FOR THE LEGAL OPERATION OF OUR PRESCHOOL. Parent cannot assist as duty parent until above mentioned documents have been received by the Enrollment & Orientation Officer. Children cannot attend the program fully until all their registration forms have been submitted.**

16. We understand that according to government regulations, all non-legal guardian duty parents are unable to do participation days in the classroom without a Criminal Record Check in accordance to the Criminal Record Review Agency.

17. We understand that the use of the preschool & Childcare facilities and the activities which our child or children undertake during program hours involves some risk of minor physical injury. We hereby release and discharge the V.I.C.P.A., the Sidney Preschool & Childcare, and its employees and volunteers from any actions, causes of action or liability which we may have individually or have on behalf of our child or children in excess of the public liability insurance carried by V.I.C.P.A. and the society.

This Parents' Agreement form and in particular, the waiver-release clauses herein contained represent the entire agreement between the parties and the said terms are contractual in nature and not a mere recital.

**We have read the Parents' Agreement form in its entirety and confirm that we know the contents of this agreement and that we sign the agreement voluntarily.**

**This Agreement signed and duty witnessed on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.**

Parent/Caregiver (persons "on duty" and delivering child to class) Print: \_\_\_\_\_

Parent/Caregiver Print: \_\_\_\_\_

Signatures: \_\_\_\_\_

\_\_\_\_\_

Witness (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

For use only for families participating for a consecutive year. I/We have reread the Parent Agreement form.

Signatures): \_\_\_\_\_

Date: \_\_\_\_\_