A2Z Kidz Ed. Inc. **Deposit Paid: _____**

REGISTRATION FORM

8003 Fairmount Dr. S.E Calgary **PH:403-258-1889**

Enrollment Date: _____

Child's Name: _____ DOB: _____ Male/Female_____
D) / (M) / (Y)

Child's Address: _____Phone:_____

FEES:

Registration Fee…… $ 50.00 {Non-refundable registration fee)

Deposit……..$500.00

(Deposit is refundable only upon one month's written notice given on or before the 1st of the Month in which would be their last month in care. Please sign below)

_____

Children 13mths to 18mths……$1250.00
Children 19mths to 3 years……..$1150.00
Children 3 years to 5 years…….. $1100.00
Kindergarten…….. $1000.00

***All names, addresses (including work or school) and phone numbers must be filled out as per Alberta Child and Youth Services.**

Mother's/Guardian Name: _____

Address Home (including postal code):_____

Work Address: _____

Home Phone: _____ Work Phone: _____

CELL #: _____ EMAIL: _____

Revised November 2024

Father's/Guardian Name: _____

Address Home (including postal code):_____

Work Address: _____

Home Phone: _____ Work Phone: _____

CELL #: _____ EMAIL: _____

OTHER PERSON DESIGNATED TO TRANSPORT CHILD TO & FROM PROGRAM:

1.) Name: _____ Phone: _____Address:_____

2.) Name: _____ Phone: _____Address:_____

ALTERNATE CONTACT IN CASE OF EMERGENCY OR TO CARE FOR CHILD WHEN ILL:

1) NAME: _____Relationship to Child:_____

Address: _____Phone: _____

2) NAME: _____Relationship to Child:_____

Address: _____Phone: _____

Language Spoken at home: _____

Child's Previous Experience in a Group? (Optional - helps with transition)

_____

Guidance & Control Methods that Child Responds (Optional)

____

_____

Any further information to assist the staff in knowing your child's fears, concerns, interest needs, special needs etc? Please note this is optional.

_____

_____

Cultural/Spiritual Background: _____

Immunizations are up to date: YES or NO

Allergies and/or food restrictions: _____

MEDICATIONS: _____

I HAVE READ THE ATTACHED PARENT HANDBOOK. I, AGREE TO ADHERE TO THE GUIDELINES and ALL POLICIES AS OUTLINED IN IT.

I ACKNOWLEDGE AND AGREE TO THE DEPOSIT, WITHDRAW, SUBSIDY, DISCIPLINARY, and TRANSPORTATION POLICIES AS SPECIFIED IN THE PARENT HANDBOOK.

Please sign and date below that you have read and understand our policies & procedures as per A2Z Kidz Ed. Inc. parent handbook:

PARENT(S) or GUARDIAN

_____DATE: _____

_____ DATE: _____

STAFF MEMEBERS ARE NOT RESPONSIBLE FOR LOST, MISPLACED OR BROKEN ITEMS BROUGHT FROM HOME(we encourage children to leave all toys at home unless asked by staff)