

REGISTRATION FOR DISCOVERY OUT OF SCHOOL CARE

DR. LILA FAHLMAN

Child's Name: _____
(SURNAME) (GIVEN NAME) (SEX)

Address: _____

Phone Number: _____ Age: _____ Birth date: _____
(month) (day) (year)

Mother's Name: _____ Father's Name: _____

Address: _____ Address: _____

E-Mail address: _____ E-Mail address: _____

Place of Work: _____ Place of Work: _____

Business Phone: _____ Business Phone: _____

Emergency Contact People: (Please be sure these people know their name is being used by you for an Emergency Contact Person. Also include home, business & cell phone numbers)

1. _____ Address: _____

Phone: _____

2. _____ Address: _____

Phone: _____

Authorized persons to whom your child may be released: _____

Names of any person whom your child may not see or have contact with:

If applicable, custody orders (yes___, no___) if yes, further instructions: _____

ADDITIONAL INFO OR COMMENTS: _____

Arrival time at Centre: _____ Pick up time at Centre: _____

Starting Date: _____ Parents Signature: _____

Termination Date: _____

CHILD'S MEDICAL INFORMATION

Family Doctor: _____ Phone Number: _____

Alberta Health Care Insurance Number: _____

1. Is there any medical condition your child has that requires special care? (Example: heart disease, respiratory problems, diabetes, etc.) If so, please state below any signs of an attack coming on and what to do to deal with the attack.
2. Is your child's immunizations up to date? Y/N Which health clinic did he or she last attend?
3. Are there any physical or emotional problems?
4. Is there anything that your child is terrified of? (Example: large dogs, putting head under water when swimming, etc.)
5. Are there any allergies or recurring medical problems?
6. Are there any foods that your child cannot eat because of medical, religious or personal reasons?
7. Any athlete's foot or other skin diseases?
8. Is your child taking any prescribed medicine?
9. What childhood diseases has your child had?
10. Additional information or comments :

Date: _____

Parents Signature: _____

Directors Signature: _____

POLICY & ADMISSIONS AGREEMENT

The generous support and understanding of Dr. Lila Fahlman administrative, teaching and custodial staff are one of the most important factors in the After School's continued success and one of its most valued assets.

Discovery Out of School Care Dr. Lila Fahlman is incorporated as a non-profit association under provincial legislation and administered by a Board of Directors.

Discovery Out of School Care Dr. Lila Fahlman meets or exceeds all of the standards established by department of Alberta Children and Youth Services It endeavors to provide a happy and safe atmosphere, varied and interesting programs and nutritious snacks for its children.

1. Hours of operation are from 7:00 am . to 6:00 p.m . Monday to Friday. The Centre is closed Christmas break (December 24th to January 1st.inclusive), Statutory holidays, Saturdays and Sundays. These dates are subject to change.
2. A registration fee of \$60.00 per child will be charged at the time of registration to ensure a spot is held.
Should the child not take the position the parent will forfeit the fee.
3. Payment by debit, Visa, MasterCard, cash or cheque is due on the 1st of every month. A surcharge of \$25 will be charged for payments received after the 5th of each month. There will also be a \$25 charge for NSF cheques. If amounts owing to the Centre are more than 15 days in arrears care will be suspended until payment is made. Care will be terminated after 30 days of nonpayment. Parents can make a personal application to the Director for extensions.
4. It is the parent's responsibility to apply for subsidy and have approval hopefully before the child enters the program. If a parent qualifies for subsidy, that parent is responsible for the full amount until subsidy is approved. Parents are to be sure that all documents required for subsidy approval are submitted in a timely manner. It is also the parent's responsibility to keep subsidy current and up to date. Should there be a lapse in subsidy approval, again the parent is responsible for the full amount until subsidy is approved.
5. One month written notice shall be given if the parent withdraws the child. Discovery Out of School Care Dr. Lila Fahlman reserves the right to cancel your child's care at any time if it is in the best interest of the child or others within the Centre.
6. ALL children must be picked up by a parent or guardian or authorized person of at least 16 years of age . Children of any age will not be allowed to walk home alone under any circumstance.
7. Each child must bring his or her own lunch. The Centre also provides nutritious morning and afternoon snacks.

8. Your child must be fully and properly clothed for the seasons and Centre activities upon arrival at the Centre. Running shoes are required for use of the school gym as well as a pair of indoor shoes for the Centre.
9. The Centre uses all due efforts in caring for children and their effects. However, the Centre cannot be liable for any lost item or damage to children's clothing or other effects.
10. Your child must remain home when ill or unable to participate in activities normally held during the Centre's hours. Any child who contracts a communicable disease such as mumps or measles must remain at home as specified by the City of Edmonton Public Health Policy. If a child becomes ill or seriously injured, the parent or guardian will be notified immediately. If parents have not picked up the child within one hour, emergency contacts will be called to pick up the child. **Only medication prescribed by a Doctor will be administered to a child. Medication must be given by the parent to a staff member and should be labeled to include the child's name. Doctor's name and the dosage required.**
11. Any change of name, address, phone number or employer must be reported to the Centre as soon as possible.
12. It is the practice of the Centre to make a phone check with the parents at both home and work numbers if a child has not arrived at the Centre before school classes begin in the morning. For their part, parents are expected to notify staff when they know in advance that their child will be absent.
13. Information regarding children who attend our program will be shared from time to time with School personnel if it is deemed in the best interest of the child. Except for the provisions of the Alberta Child Welfare Act, information will not be provided to any other individuals or organizations without written permission of the child's parent or guardian.

I have read and understand all the policies in this agreement as well as those in the *"Parent Information Handbook"*:

Date _____

Parents Signature _____

Director's Signature _____

TRANSPORTATION POLICY

This policy has been created for children attending Dr. Lila Fahlman School (680 Allard Boulevard SW Edmonton T6W3A2) who are enrolled in our program. Dr. Lila Fahlman School and Discovery Out of School Care work together as a community and all show concern and responsibility for their children.

Parent is responsible to bring child/children into the Centre and inform the staff of their child's arrival.

1. Discovery Out of School Care is responsible to release the child/children at first bell from OSC entrance/exit door.
2. Dr. Lila Fahlman School staff and staff of the Out of School Care are responsible to supervise children from first bell and children go into school.
3. Discovery Out of School Care staff are also responsible for supervision of only KinderCare children over lunch hour.
4. In inclement weather children will be kept inside and go to their classrooms from our program.
5. Discovery Out of School Care is responsible to walk kindergarten aged children to and from the After School Care.
6. Discovery Out of School Care is responsible to meet and walk only the Kinder Care students at lunch and after school at their classroom.
7. Parents are responsible to inform the Out of School Care of any changes in their child's routine of being picked up.
For example: sickness, Dr.'s appointment, alternate pick-up etc.

Failure to arrive procedures for Kinder Care and after school:

8. Children are asked if they may or may not have seen the missing classmate
9. School office is called to determine if child was marked absent and/or left the school
10. Once verified that the child was at school a visual check is made outdoors to ensure that child is not on the school premises. Parents are called to verify if child was removed from the school. If parent cannot be contacted, emergency contact persons are phoned. If child is detained due to school activities and one trip has already been made to the class, staff should then ask Donald R. Getty School staff to escort the child to our program when their activities are completed. If all of the above steps have been exhausted and we cannot locate the child, Edmonton City Police will be called.

Parents are responsible to notify staff that their child will be absent.

Child's Name _____

Parents printed name and Signature: _____

Date: _____

EMERGENCY PERMISSION

I hereby give my permission for the staff of Discovery Out of School Care Dr. Lila Fahlman to give my child emergency treatment as they think necessary.

(Child's Name)

I will be responsible for all costs incurred due to the emergency.(Example: ambulance costs, etc.)

ADDITIONAL COMMENTS: _____

Parent's Signature _____

PICTURE RELEASES

PHOTOGRAPH DURING ACTIVITIES:

I hereby release for publication or telecast in any news media, the photography take of:

(Child's Name)

Participating in Centre activities. To protect the privacy of parents and children, no photograph will be released unless this consent form is signed.

Date _____

Parent Signature _____

Director's Signature _____

CONSENT FOR FIELD TRIPS

The Discovery Out of School Care Dr. Lila Fahlman has full permission to allow my child/children to go on various field trips outside the Centre, as well as activities in the school gymnasium and outside playground. The children will be accompanied by staff members. I understand that I will be notified in advance of the destination, date and time return of each field trip. If for some reason my child/children cannot participate in a particular field trip, I will notify the staff immediately

Childs Name _____

Date _____

Parents Signature _____

Directors Signature _____

Discovery Out of School Care Dr. Lila Fahlman Program is proud of its children and their parents. Staff and volunteers take every opportunity to show it off.

ART WORK/WRITTEN WORK FOR DISPLAY

Your child/children are very creative and we like to show off their (crafts, stories, etc.) in displays throughout the Centre or maybe even in publication.

PHOTOGRAPHS/MEDIA INTERVIEWS

In the past the Centre has been contacted by the media (newspapers, radio, TV) for quotes and/or interviews from children and parents. These video images and sounds may be published or aired in a variety of locations including audio tapings on television, radio and newspaper.

PARENTS/CHILDREN NAMES/PHOTOGRAPHS

Parents and children's names and pictures may be posted by the Centre in relation to the daily operation i.e. cubbies, mailboxes, charts, etc.

In order for you and your child to have the full benefit of the Centre's program, we need parent's permission for the above areas. Please check off the following items to indicate your willingness for you and your child to participate.

_____ Artwork for display/publication

_____ Written work for display/publication

_____ Photographs for Centre display

_____ Children and parents name displayed for daily running of Centre
i.e.: charts cubbies, mailboxes, etc.

Child/Children's Name(s) _____
(First and last name)

Parent/Guardian(s) Signature _____

Parent/Guardian(s) Printed Name _____

Date _____