



DISCOVERY PLACE PRESCHOOL-REGISTRATION

**Please print clearly*

McKee: 780-803-5573

DRG/Beulah Preschool: 780-236-5573

Child's Information

First Name _____ Last Name _____ Female Male
Most commonly used name _____ Child's 1st Language _____
Home Phone _____ Parent's e-mail _____
Home Address _____ Postal Code _____
Date of Birth (mm/dd/yyyy) _____ Age _____

Parent's Information

Parent 1 Name _____
Home Phone _____ Cell _____ Work _____
Address (if different from child) _____

Parent 2 Name _____
Home Phone _____ Cell _____ Work _____
Address (if different from child) _____

Emergency Contact (other than parent) **Emergency contact must reside in the Edmonton area**

Name _____ Relationship to child _____
Home Phone _____ Cell _____ Work _____
Address _____ Postal Code _____

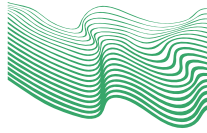
Alberta Health Care # _____ Is your child right or left-handed _____
Is your child's immunization up to date? Yes No
Does your child take regular medication? Yes No
Allergies or medical concerns _____

For Office Use Only

Class Confirmed _____ Non-Refundable Registration Fee _____
Date _____ EFT _____ Cheque # _____ Cash _____



DISCOVERY PLACE PRESCHOOL-FEES



Discovery Place Preschool - Fees

\$100.00 - **non-refundable** deposit required for all registrations _____[initials]
\$60.00 - **non-refundable** in class field trips [3] & special class projects ___[initials]

Class Options + Location Availability

Morning Hrs [AM]: 9:30 am - 12:00 pm McKee

Afternoon Hrs [PM]: 12:45 pm - 3:00 pm McKee

Morning Hrs [AM]: 9:00 am - 11:00 pm DRG

Afternoon Hrs [PM] 12:15 pm - 2:15 pm DRG

Pricing Options

Please Circle one

\$320.00/month for 5 days/week - \$75 Affordability Grant = You pay \$245	AM PM
\$215.00/month for 3 days/week - \$75 Affordability Grant = You pay \$140	AM PM
\$165.00/month for 2 days/week T/Th - \$75 Affordability Grant = You pay \$90	AM PM

To register for the upcoming preschool year you must have:

1. A fully completed registration.
2. Non-refundable registration fee
3. Completed Pre-Authorized Debit Form including a bank printout or void cheque.

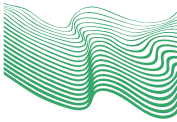
Please note:

The monthly tuition fees are due on your child's first day of preschool _____[initials]_____

Apply for childcare subsidies [here](#)



DISCOVERY PLACE PRESCHOOL – PERMISSIONS



Emergency Permission

In case of emergency, I authorize Discovery Team staff to give my child emergency care. Should it be necessary, I authorize the Discovery Team to seek and obtain medical or emergency care, on-site or from an outside location. I will be responsible for whatever expenses are incurred.

Date: _____

Signature of Parent/Guardian: _____

Playground Permission

I authorize the staff of the Discovery Team permission to take my child for outdoor activities on the playground.

Date: _____

Signature of Parent/Guardian: _____

Photo Permission

I give the staff of Discovery Place Preschool permission to take photographs of my child. These photographs may be used for display on behalf of the preschool or to assist in the children's development.

Date: _____

Signature of Parent/Guardian: _____

Instagram Permission

I give permission to post my child's photo on Discovery's **PRIVATE** Instagram Page accessible only to Discovery Preschool Families.

Date: _____

Signature of Parent/Guardian: _____

Withdrawal Policy

Parents agree that a minimum notice of one full month (notice to be given on the first of any given month) will be given for permanent withdrawal of any child from Discovery Place Preschool agree to pay a month's fee in lieu of. **No exceptions will be made.**

Date: _____

Signature of Parent/Guardian: _____



DISCOVERY PLACE PRESCHOOL - POLICIES

**Parents please review the Wellness Policy and the Discipline Policy.*

*Sign and date**



Wellness Policy

The Wellness policy was developed in order to ensure a healthy learning environment for the program participants. It is extremely important for each family to ensure that if their child is sick that they NOT ATTEND PRESCHOOL. If you bring your child to school with any flu like symptoms you will be called immediately to return and pick up your child from the classroom. In order to assist you in determining if your child is too sick to attend the program it may be helpful to consider the following:

- fever of 101.4 F or 38C
- diarrhea or vomiting within the past 24 hours. (Do not bring your child to preschool if they have thrown up the night before, please wait 2 days)
- thick green or yellow discharge from the eyes or nose
- sore throat-especially if a rash is present
- communicable diseases such as whooping cough, measles, mumps, hepatitis
- other contagious conditions such as impetigo, scabies, or lice (until treated)
- unusual tiredness, uncontrolled coughing, extreme irritability

Discovery Preschool Discipline Policy

Safety First; Toys belong to everyone; All play together; Respect & Kindness for all people & things.

If a situation arises when we feel that a child is not behaving in an appropriate manner, we will use the situation to teach them important life skills. Our first response is to stop the undesirable behavior and to talk with the children involved and explain why the interaction wasn't appropriate.

1. We will give examples of what they could have done instead.
2. We will encourage the child to use their words. "Please stop that ...I don't like that ...I don't want to do that...that hurt my feelings...can I have that when you are finished...we need to take turns ..." are good verbal tools to use.
3. If a child has acted in a physical manner, we teach them to use their words not their body. For example, hands are not for hitting.
4. If there are discipline issues that require more attention, it is our goal to communicate with parents immediately and help work out ways to improve the situation.

Date:_____

Signature of Parent/Guardian:_____



DISCOVERY PLACE PRESCHOOL –PAD AGREEMENT

DISCOVERY PLACE PRESCHOOL SOCIETY OF EDMONTON PAD AGREEMENT

DATE _____

Pre-authorized Debit Plan Agreement Your Authorization as Payor to DISCOVERY PLACE PRE-SCHOOL SOCIETY OF EDMONTON (the “Payee”) to Debit an Account Instructions 1. Please complete all sections in order to instruct your financial institution to make payments directly from your account. 2. Please sign this Authorization. For joint accounts, all account holders must sign if more than 1 signature is required on cheques issued against the account. 3. **Return the completed form to the Payee with a blank cheque marked “VOID or the PAD form from your bank**

Payor Information

Name _____

Child’s Name _____

Address _____

Telephone _____

Preschool Location (McKee Preschool or Beulah Preschool): _____

Financial Institution Branch Address to debit my account (attach bank form or void cheque)

DEPOSIT ACCOUNT NUMBER _____

BRANCH TRANSIT NUMBER _____ (5 DIDGITS)

FINANCIAL INSTITUTION NUMBER _____ (3 DIDGITS)

FINANCIAL INSTITUTION NAME _____

BRANCH ADDRESS _____

You, the Payor may revoke your authorization at any time by contacting DISCOVERY PLACE PRE-SCHOOL SOCIETY OF EDMONTON by phone or email. Subject to providing 10 days notice. To obtain a sample cancellation form or for more information on your right to cancel a PAD agreement, contact your financial institution.

Type of Service _____ Personal _____ Business

Payment Frequency MONTHLY to be withdrawn on the 1st of every month

Payment Start Date (MM/dd/yy) _____

Name of Account Holder Signature and Date _____

You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD agreement. To obtain more information on your recourse rights, contact your financial institution.

DISCOVERY PLACE PRESCHOOL SOCIETY OF EDMONTON 5517 Allbright Sq. SW Edmonton, AB T6W 3V1

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LOCATION	TYPE OF SERVICE (KINDER OSC PRESCHOOL)	AMOUNT