



REGISTRATION PACKAGE

Welcome to Happy Days Playschool

It is a pleasure to welcome you to Happy Days Playschool. On behalf of the Teacher and the member families, we are glad you have joined our school. We look forward to getting to know you and your family.

The information included in this package will provide you with the necessary basics to ensure your child is properly registered with Happy Days Playschool. There are a number of forms that require completion and you can expect to spend approximately 30 minutes to fully complete the information. **In order to reserve a space for your child, it is important that this information is completed in full and the required fees paid.**

If you need any assistance please contact the Enrollment Coordinator by calling Happy Days Playschool at 604-936-0722.

The following checklist lists everything that is necessary to process your application. Please be sure to include all the following documents and payments when returning your registration package:

Payment of the following:

- Registration Fee: \$30.00
- First Month's Fees: \$110.00 for Crickets
\$110.00 for Ladybugs
\$140.00 for Dragonflies
\$140.00 for Bumblebees (3 day class)
\$235.00 for Bumblebees (5 day class)

★ (Registration fee is payable at the time of enrollment, first month's fee (September's) should be postdated for August 1st)

Registration Form

- Childs Info
- Parents Info
- Authorized Pick up
- Care Card Number
- Doctor/Dentist Info
- Medical/Allergy info
- Parent/Guardian Signature

Parent Agreement (one copy for the school, keep one copy for your records)

Waiver Release Form

Emergency Cards (please complete BOTH copies on the sheet)

- Child Info
- Parents Info
- Care Card Number
- Doctor Name and Number
- Alternate Pick Up
- Out of Province or Out of Country Contact
- Parent/Guardian Signature

Immunization Record & Emergency Medical Aid Information

Photograph of Child (required security measure, in case of emergency)

PLEASE COMPLETE ALL FORMS AND RETURN TO THE ENROLLMENT COORDINATOR OR PLACE IN THE ENROLLMENT MAIL SLOT IN THE SCHOOL CLOAKROOM.



FEES & PAYMENT PROCEDURES

The following fees are associated with enrollment and ongoing membership with Happy Days Playschool Association. The fees and payment procedures are detailed as follows:

*PLEASE MAKE ALL CHEQUES PAYABLE TO **"HAPPY DAYS PLAYSCHOOL"***

FEES TO BE PAID UPON ENROLLMENT

1. ENROLLMENT FEE

A non-refundable enrollment fee of \$30 is payable upon registration of a child at Happy Days Playschool. This fee secures a space for the child in the chosen class. This cheque shall be dated payable at the time enrollment forms are submitted.

2. FIRST MONTHLY TUITION FEES

A cheque for the amount of the first month's tuition fees (see details below) is required upon enrollment. This cheque shall be post-dated to August 1st. Should you withdraw from Happy Days Playschool within 30 days prior to the scheduled start date; this first monthly tuition fee shall be non-refundable.

MONTHLY TUITION FEES

PAYMENT:

- For children starting in September, bring cheques for monthly tuition to the Parent Orientation Meeting in September.
- For children enrolling after September confirm with the Enrollment Coordinator the amount due if starting part way through a month, otherwise submit cheques as listed below to your class Treasurer representative.

FEES:

CRICKETS (Tues/Thurs am) & LADYBUGS (Tues/Thurs pm) - 2 Day Class for 3yr olds

- Cheques in the amount of \$110.00 dated payable the 1st of each month beginning with October and continuing through June. Your September fee is dated for August 1st (see above).

DRAGONFLIES (Mon/Wed/Fri am) & BUMBLEBEES (Mon/Wed/Fri pm) - 3 Day Class for 4yr olds

- Cheques in the amount of \$140.00 dated payable the 1st of each month beginning with October and continuing through June. Your September Fee is dated for August 1st (see above).

BUMBLEBEES (Mon/Tues/Wed/Thurs/Fri pm) - 5 Day Class for 4yr olds

- Cheques in the amount of \$235.00 dated payable the 1st of each month beginning with October and continuing through June. Your September Fee is dated for August 1st (see above).



REGISTRATION FORM

Registering for:

- Crickets \$110 (Tues/Thurs am)
- Ladybugs \$110 (Tues/Thurs pm)
- Dragonflies \$140 (Mon/Wed/Fri am)
- Bumblebees \$140 (Mon/Wed/Fri pm)
- Bumblebees \$235 (Mon/Tues/Wed/Thurs/Fri pm)

Name of Child _____
(Surname) (First Name)

Name Child Responds to: _____ **Sex:** F: _____ M: _____

Address: _____
(Street) (City) (Postal Code)

Birth date: _____ / _____ / _____ **Home Phone#:** _____
(year) (month) (day)

Parents email address: _____

Parent / Guardian Information: (List in order of who to contact first, second, third)

NOTE: Happy Days Playschool considers all people listed below as people permitted to pick up the child

	Contact Name & Relationship to Child	Place of Work & Hours of Work	Contact Information
1	_____ Name _____ Relationship (Mother/Father)		Home Phone: _____ Work Phone: _____ Cell Phone: _____ Email: _____
2	_____ Name _____ Relationship (Mother/Father)		Home Phone: _____ Work Phone: _____ Cell Phone: _____ Email: _____
3	_____ Name _____ Relationship (Grandparent, Friend, other)		Home Phone: _____ Work Phone: _____ Cell Phone: _____ Email: _____

Additional Authorized people for pick-up please attach to back

Medical Information:

Doctor	Dentist	Care Card
Name: _____	Name: _____	B.C. Care Card #: _____
Phone: _____	Phone: _____	_____
Location: _____	Location: _____	_____
_____	_____	

Instructions for Teacher/Caregiver:

	Specify special needs/comments:
Health concerns for example: <ul style="list-style-type: none"> • Allergies • Medications • Vision/speech/hearing • Learning Disabilities 	
Special diet requirements	
Primary Language (if other than English)	
Other Languages	
Other	

Has child had other play/recreational/daycare experiences away from home?

- Yes (Describe briefly when, where, duration, any concerns) _____
- _____
- No

List any Siblings and their Ages: _____

Are you a returning parent to Happy Days Playschool? Yes _____ No

Year(s)

Other relevant information necessary to provide Happy Days Playschool:

How did you hear about Happy Days Playschool?

- Newspaper Phone book Word of Mouth Internet
- Other (please specify): _____

Information Provided by:

(print name)

(signature) (date)

FOR HAPPY DAYS ENROLLMENT COORDINATOR ONLY

Information Processed by: _____

(Print name) (Date)

Enrolling for: _____ / _____

(Month) (Year) (Class)



PARENT AGREEMENT

(SCHOOL COPY)

Please read and sign below

1. Morning sessions are from 9:15 a.m. to 11:15 a.m., afternoon sessions are from 12:30 p.m. to 2:30 p.m. I will make every effort to be prompt in bringing my child to school so the program may begin, and in picking my child up at the end of the session so no one must wait for me.
2. I will not send my child to school if there is any question of illness. If my child contracts a communicable disease, I will notify the teacher immediately so that other families may be made aware of the contact. I will also advise the teacher of any allergies or dietary concerns.
3. I will notify the teacher if my child will not be attending preschool for the day, so that the rest of the class does not wait unnecessarily. In order to help the teacher deal with any potential unusual behaviour, I will inform the teacher of any event or change in routine at home that may affect my child.
4. If I have any questions about my child's progress or the preschool program, I will direct them to the teacher. I will direct suggestions about the administration of the playschool to the Executive via my class representative.
5. I understand that I am responsible for knowing the contents of the Parent Handbook.
6. I understand that my child is expected to be toilet trained or in the process of learning to use the toilet. If my child is not completely toilet trained, I will put my child in a diaper or pull-ups for sanitary reasons. I understand that I will be called should a change be required.
7. In case of injury to my child while in the care, custody, or control of the playschool, I hereby waive all claims against the school in excess of public liability insurance carried by the playschool. In case of car-pooling and transportation of children other than my own to and from school, I am aware that adequate third person liability on my private automobile insurance is mandatory.
8. I will pay my child's tuition fees by cheques post-dated from September to June. For enrollment in January, payment is by cheques post-dated from January to June.
9. If it becomes necessary to withdraw my child from the school, I will give one (1) calendar months' notice in writing to the Enrollment Officer, or pay one (1) month's tuition in lieu of notice. If I give notice after May 1st, I expect also to forfeit my prepaid June tuition. If I withdraw my child within 30 days of the scheduled start date (e.g. September), I will waive my first month's tuition fees.

I have carefully read the above Parent Agreement and agree to follow it to the best of my abilities. I am willing to abide by the Constitution and Bylaws of Happy Days Playschool Association. I understand that failure to comply with Association policies and procedures may result in the suspension or termination of my membership. My signature indicates that I am in agreement with all of the above.

Name (please print)

Signature

Date

Child's Name

Child's Class (please check) **Crickets** **Ladybugs** **Dragonflies** **Bumblebees (3 day class)**
 Bumblebees (5 day class)



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Name (please print)

Signature

Date

Child's Name

Child's Class (please check) **Crickets** **Ladybugs** **Dragonflies** **Bumblebees (3 day class)**
 Bumblebees (5 day class)



IMMUNIZATION RECORD & EMERGENCY MEDICAL AID

Check class child is registered for:

- Crickets (Tue/Thurs am)
- Ladybugs (Tue/Thurs pm)
- Dragonflies (Mon/Wed/Fri am)
- Bumblebees (Mon/Wed/Fri pm)
- Bumblebees (Mon/Tues/Wed/Thurs/Fri pm)

Name of Child _____
(Surname) (First Name)

Birth date: _____ / _____ / _____
(year) (month) (day)

The Child Care Licensing Regulations require that children’s immunization records are maintained. Please ensure that children’s immunizations are up-to-date and on record at Happy Days Playschool.

Child’s Immunization History:
Please record dates as: Year / Month / Day of immunization

Diphtheria	Pertussis	Tetanus	Polio	Measles	Mumps	Rubella
1.	1.	1.	1.	1.	1.	1.
2.	2.	2.	2.	2.	2.	2.
3.	3.	3.	3.			
4.	4.	4.	4.			
5.	5.	5.	5.			

I authorize the staff at Happy Days Playschool to call a medical practitioner or ambulance in the case of accident or illness of my child, if the parent cannot immediately be reached.

Authorized by Parent/Guardian: _____
(Print name)

(Signature) (Date)



Note to Parents – please complete information on both cards

STUDENT EMERGENCY CARD - NORTH BAG

Child:	Date of Birth:	
Address		
Home Phone	BC Care Card #:	
Mother's Name	Work No.:	Cell #:
Father's Name	Work No.:	Cell #:
Doctor's Name	Phone No.:	
Child's Allergies/Medical Conditions		
Date of Child's last Tetanus Shot		
<u>Alternate Contact & Authorized Pick Up:</u>		
	Phone No.:	
	Phone No.:	
<u>Out of Province or Out of Country Emergency Contact:</u>		
	Phone No.:	
I authorize Happy Days Playschool to obtain emergency medical treatment for my child in the event they are unable to reach me. I consent to an ambulance transporting my child if necessary.		
Signature of Authorized Guardian		Date:



Note to Parents – please complete information on both cards

STUDENT EMERGENCY CARD - SOUTH BAG

Child:	Date of Birth:	
Address		
Home Phone	BC Care Card #:	
Mother's Name	Work No.:	Cell #:
Father's Name	Work No.:	Cell #:
Doctor's Name	Phone No.:	
Child's Allergies/Medical Conditions		
Date of Child's last Tetanus Shot		
<u>Alternate Contact & Authorized Pick Up:</u>		
	Phone No.:	
	Phone No.:	
<u>Out of Province or Out of Country Emergency Contact:</u>		
	Phone No.:	
I authorize Happy Days Playschool to obtain emergency medical treatment for my child in the event they are unable to reach me. I consent to an ambulance transporting my child if necessary.		
Signature of Authorized Guardian		Date:



Waiver of Release of Information / Photographs

Dear: Parents/ Guardians,

Happy Days Playschool would like to share the following information with other parents in your child's class in the form of a class list:

- Student's FIRST and LAST name
- Parent's FIRST and LAST name
- Home phone number
- E-mail address
- Photographs

This information will be useful to you when arranging play dates, emergency pick-ups, Valentine's Day, etc. Also, the children in the class are spending a lot of time together and it is nice to know who will be around your child when they are at school.

From time to time your child's photo may be on display in the pre-school, as well, we put together a year-end DVD which is compiled of pictures taken throughout the school year. The DVD is only available to Happy Days students. The pictures that are taken will ONLY be shared with those attending Happy Days playschool.

I, _____, hereby give permission to Happy Days Playschool to distribute the information mentioned above to families enrolled in Happy Days ONLY. I also give permission to use my child's photos in the ways mentioned above ONLY.

Childs Name: _____

Parent Signature: _____

Date: _____

HAPPY DAYS PLAYSCHOOL ASSOCIATION

POLICY & PROCEDURES MANUAL (EXERPT)

Section: MEMBER RESPONSIBILITES
Subject: Food
Effective: September 1, 2006

Policy Number: 1.4
Page: 9 of 1
Revised: June, 2006

Policy:

Happy Days Playschool promotes healthy food choices and responsible food handling for the children's snacks and other shared food.

Procedure:

1. A snack is part of the daily curriculum except for field trip days (see Policy 3.5) and special occasion party days (e.g. Halloween, Christmas, etc.), when an alternate snack will be arranged.
 2. Parents are responsible for preparing the snack for their own child. Food must be cut into bite-sized pieces. Extra care must be taken with foods that pose a choking hazard (e.g. grapes must be cut lengthwise into halves and carrots must be cut lengthwise).
 3. Acceptable snack items include healthy choices such as; fresh or dried fruit, vegetables, crackers, cheese, pickles, etc. Sweets, cookies, and nuts are not acceptable food items.
 4. Children are permitted to bring their own water bottle to class that will be brought out during snack time. Please note that children may bring **ONLY WATER** to class. No juices or other beverages are permitted.
 5. Care must be taken with children who have allergies or food sensitivities. Class, child, and food trigger *information is posted in the kitchen (see Policy 3.3 for more details).*
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