



Instructions for 2020/2021 Program Registration

The first week of classes will begin Tuesday, September 8th, 2020. Morning classes run from 9:05 – 11:00 AM. Afternoon Classes run from 1:05 – 3:00 PM. Due to licensing regulations the classroom doors will not be open until 8:55 AM for morning classes and 12:55 PM for afternoon classes. **Our license requires that you sign your child in and out of the building every day.**

Each day, including the first, please bring:

- Inside shoes
- Change of clothes (in case an accident or over enthusiastic play with water, paint etc)
- Appropriate outdoor clothing (some days the class may play outside, weather permitting)
- A healthy, ready to eat (peeled/cut) snack consisting of at least two food groups (raisins, crackers and cheese, juice box, fruit, cereal bar, etc.) in a lunch container labelled with your child's name and on all items in the lunch kit should also be labelled.

Read the Cookie Jar Preschool handbook for more detailed information about the program then follow the steps below to complete the registration process.

1. Choose a class preference for your child. Every effort will be made to have your child enrolled in that class. However, if your first choice cannot be accommodated, you will be contacted by phone. The class options are:
 - Children who are three (3) years old at the beginning of the school year and who will not turn four(4) before December 31, 2020 may register in the Wednesday morning class
 - Children who are three (3) years old at the beginning of the school year and will turn four (4) before December 31, 2020 may register in the Tuesday morning class and/or the Thursday morning class, and/or Wednesday afternoon class.
 - Children who are four (4) years old and/or will be attending Kindergarten in the fall of 2021 may register in any of the following classes:
 - * The Tuesday/Thursday afternoon class (twice a week program) or
 - * Any of our other classes except for the Wednesday morning class. **The Wednesday afternoon class will only run if we receive a specific number of student registrations.**

1. Fill out all four pages of the registration form. Fill out the portable emergency information record card. Provide signatures where indicated. We also require a photocopy of your child's birth certificate. Your child may not be registered until all of these forms are completed in full. Registration processing is performed by volunteers – your effort to keep call-backs to a minimum is appreciated immensely!
2. Mail all of these fully completed forms and all of the following fees to Cookie Jar Preschool in the attached pre-addressed envelope. Please make each cheque payable to **Cookie Jar Preschool**.
 - \$30.00 registration cheque (**dated now**).
 - \$150.00 deposit cheque for the Volunteer Bond (**post dated for February 1, 2021**) See the handbook about details about this fee and how it is possible to have it refunded to you before the end of the program.
 - Full tuition fees are now due at the time of registration. However, you have three payment options available (see below).
 - Cookie Jar accepts email money transfer. You may email at cookiejarpreschool@gmail.com. Please include Child's name for reference.

| Options | Payment Options | Once a week Program | Twice a week Program |
|----------|---|---------------------|----------------------|
| Option 1 | 9 - Monthly Cheques post-dated Sept. 1, 2020 to May 1, 2021 | \$ 55.00/Month | \$ 110.00/Month |
| Option 2 | 2 - Semester Cheques post-dated Sept 1, 2020 and Jan. 1, 2021 | \$ 247.50/Semester | \$ 495.00/Semester |
| Option 3 | 1 - Annual Cheque post-dated Sept 1, 2020 | \$ 495.00 year | \$ 990.00 year |

Note: Double check everything. Full registration of your child will require that the forms are filled out in full and fees are included in the envelope. Enrolment occurs on a first-come first-serve basis according to the post mark date on the envelope.

Open registration for all students starts January 28th, 2020.

1. You are welcome to attend the Annual General Meeting set for Monday, May 4, 2020 at 7:00 PM at Cookie Jar. This will be the opportunity for you to ask questions, voice concerns and sign up to volunteer your time. Election of the next year's Board will also take place. You can help make your child's preschool experience more rewarding and exciting by filling one of the positions of the Board.

Volunteering for a Board position ensures your volunteer bond cheque will be refunded.

2. You are welcome to attend our Open Houses planned for Tuesday, January 28th, 2020 and Tuesday, September 1st from 3:30 to 6:00 PM at Cookie Jar Preschool. Bring your child, see the classroom, meet the teachers and let your child explore the surroundings. Please bring a photocopy of your child's birth certificate to the Open house, if you are planning on registering. You can pick up your registration fee receipts and confirm class placement at that time. Registration fee receipts and class confirmation will be mailed out to those who do not attend the open house.

If you have any questions or concerns: Please contact Cookie Jar Preschool at 403-845-7600 and speak with the teacher, come to the general meeting and/or the open house, or contact a Board member and we will return your call as promptly as possible. **We make every effort to support our Cookie Jar Preschool families in whatever ways we can.**

(You may keep this above information for future reference).

Cookie Jar Preschool

Child Registration Form

**** All information contained in this application will be kept strictly confidential****

| Child Information | |
|---|---|
| Child's Full Name: | Gender: (please circle) M F |
| Date of Birth: | AB Health Care No: |
| Street/Rural Address (Blue sign): | Home Phone No: |
| | Postal Code: |
| Mailing Address: Same () or: | Distance from Cookie Jar: KM |
| Contact Information | |
| Mother/Female Guardian Name: | Father/Male Guardian Name: |
| Address Same () or: | Address Same () or: |
| Home Phone No: | Home Phone No: |
| Cell Phone No: | Cell Phone No: |
| Work Phone No: | Work Phone No: |
| Employer: | Employer: |
| Parents Email Address: _____ | |
| If parents are divorced or separated, child lives primarily with: *If you require more space for additional female or male guardians please attach a sheet to this form. | |
| Program Request | |
| Please list your preferences of class enrolment from first, second, third. Please note that every effort will be made to have your child attend the class you prefer. In the event the class you prefer is full, your name will be placed on a waiting list for that class and your child will be enrolled in your next preference of class. You will be informed by phone if this occurs. | |
| <input type="radio"/> Tuesday AM – 3 year olds (who will turn four before December 31, 2020) & 4 years old | <input type="radio"/> Tuesday/Thursday PM – This twice a week program is for 4 year olds (or children turning 4 before Dec 31, 2020 and) who will be starting Kindergarten next year. |
| <input type="radio"/> Wednesday AM – “young” 3 year olds (who will not turn 4 before December 31, 2020) | <input type="radio"/> Thursday AM – 3 year olds (who will turn four before December 31, 2020) & 4 year olds |
| | |

| Emergency Contact Person (People who can be contacted during program hours if parents cannot be reached) | |
|---|--|
| Name: | Name: |
| Relationship: | Relationship: |
| Street/Rural Address (Blue sign): | Street/Rural Address (Blue sign): |
| Home Phone Number: | Home Phone Number: |
| Work or Cell Phone Number: | Work or Cell Phone Number: |

| People Allowed To Pick Up Your Child From Cookie Jar Preschool (Include the names of parents) | | |
|---|--|--|
| | | |
| | | |

Note: The Cookie Jar Preschool staff will not release your child to anyone who is not listed above unless you send a written consent with the person. Please phone Cookie Jar Preschool and notify teachers if this is going to occur.

| Personal Information | |
|---|---|
| Has your child had any previous experience with preschool? If yes, where and for how long? | Does your child have any fears that you are aware of? |
| Any other play groups experience (Day Care, Family Day Home, Library Group etc)? | How would you describe your child's personality? |
| Any brothers or sisters? Please include their names and ages: | Is there anything else you can think of that would help us to know and understand your child better? |
| What are your child favourite activities? | If anyone in your household has a skill (sewing, woodworking, painting, baking, guitar playing, etc.) that we may call upon at sometime during the year please make note of it here. |

Health Information

Are your child's immunizations up-to-date as of this application? Please circle: YES NO

Physicians Name: (if "attending", please list last local Doctor visited) and phone number:

Please check if your child has had:

- Chicken Pox Scarlet Fever Whooping Cough
- Mumps Measles Hepatitis
- Other (Please describe)

Please check if your child has frequent:

- Stomach Pains Vomiting Asthma
- Eczema Other (Please describe)

Has your child had any serious accidents or operations? If so, when?

Is your child allergic to anything (drugs, food, environmental factors)? Please describe:

Please check how this allergy manifests itself?

- Hives Asthma Hay Fever
- Other (Please describe):

Does your child have any special needs (physical, social, emotional, intellectual or behavioural) relevant to their care in an educational setting? Please explain:

Is your child taking any ongoing medications? Please describe and list medications name(s): Please note that if medications are to be administered by Cookie Jar Preschool personnel you will be required to complete a *Request to Administer Medication* permission form).

Consent/Permission

Please read each point below and sign the bottom of the page. Please contact the teachers or the registrar should you have any questions or concerns.

I agree to allow my child to have his/her picture taken and/or recorded by video camera or other recording technology for the expressed use of the Cookie Jar Preschool (including social media; face book and web page). I also agree to have our names and phone number included on a parent phone list sheet for the purpose of informing parents when classes are cancelled etc.

I give Cookie Jar Preschool Personnel permission to call for Emergency Medical attention and/or transportation in the case of a serious injury, accident or medical emergency involving my child. I understand that I will be liable for all costs incurred as a result of this medical emergency or serious injury.

If I choose to allow my child to participate and be involved in any field trips organized by Cookie Jar Preschool staff, I release the Cookie Jar Preschool from any liability incurred as a result of my child's or my own involvement in this activity. I acknowledge that I am responsible for the transportation of my child to and from ALL field trips.

I agree to pay all tuition fees for the 2020/2021 school year in advance by post dated cheques dated the first of the month in which they are due. I understand that if my fees are determined to be in arrears and I have not made any effort to remedy this financial situation in a timely manner as determined by the Cookie Jar Preschool Board, my child will be withdrawn from the program immediately.

I agree to pay any service charges or levies incurred by Cookie Jar Preschool as a result of my cheque being returned to the centre as N.S.F. I understand that I must rectify the N.S.F. cheque and any service charges incurred by cash within one week of my being notified of this matter. I agree that failure to rectify this situation in a timely manner (one week) unless other arrangements have been made with Cookie Jar Preschool Board will result in my child's withdrawal from the program.

I agree that the information I provided on these registration forms is accurate to the best of my knowledge. I agree to have pictures of my child used for the expressed use of Cookie Jar Preschool

- Facebook
- Web Page

Parent/Guardian Signature:

Date:

Application date:..... Complete admission date:.....

Start date:..... End date:.....