

Tel #: 780-424-8117

REGISTRATION FORM

Date of Admission		
Child's name		
Address		
Birthdate		
Mother's Name		Phone
Address		Bus/Cell #
Employment		Hours
Father's Name		Phone
Address		Bus/Cell
Employment		Hours
Emergency Contact Persons		
Name	Name	
Address	Address	
Cell#Work	Cell#	Work
Child's Doctor		
Name Ad	dress	
Phone Alberta He	ealth Care #	ŧ
Child on any medication at home: Yes	No	
What type	what for	
Allergies		
Special Needs or medical concerns (operation	tions)	
Immunization Record		
Is your child's immunization up to date?		
		WHERE KIDS SIMPLY GROW
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Planet Kids Daycare 11517 105Ave NW Edmonton, Alberta, T5H 3L8

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Background of Child

German measles Chicken pox Whooping cough	YES/ NO YES/ NO YES/ NO YES/ NO YES/ NO YES/ NO	convulsions (not epilepsy) epilepsy head injury YES/NO accidental poisoning removal of tonsils eye surgery	YES/ NO YES/ NO YES/NO YES/ NO YES/NO
Difficulties with speech YES/NO 3 or more earaches YES/NO Difficulty with hearing YES/NO feeding/sleep problems YES/NO Difficulty with eyesight YES/NO daytime or bedwetting YES/NO Please list any other information considered relevant:			
Culture Language other than English Previous experience in day-care Family interests/activities involving child Family interests/activities involving child Social and Emotional Brothers Age Sisters Age Characteristics of child's personality			
Discipline at home Child reaction to il	lness: Will child te	ell staff? Is the child toilet train	

Play Learn and Grow and Control of Control o		
Planet Kids Daycare 11517 105Ave NW Edmonton, Alberta, T5H 3L8 Tel #: 780-424-8117		
Authorized persons to whom the child		
	released to anyone that is not listed on authorization form.	
Parent Signature Date Field Trip	Staff Signature	
Parent signature	_Date	
Immunization Record		
Is your child's immunization up to date?		
Medical Attention		
In the event of an emergency when I cannot be	idents or illnesses occurring while my child is in the centre. reached, I give my permission for any medical procedure physician selected by the centre. I understand that I remain on.	
Parent Signature	_ Date	
Transportation Policy		
advised that the transportation will be on site at plus for you that I maintain this time please have your ch	am and the drop off is at pm. Please be s or minus five minutes of the above time. Since it is important hild ready so that the pickup is done flawlessly. My waiting time of you I will leave, which means you have to make your own	
The pickup service will only be disrupted if the weat be informed as soon as possible.	ather conditions are extreme. Should this ever happen you will	
	OVIINCIAL OPERATING AUTHORITY CERTIFICATE and is a further information please contact day care number which is	
Parent Signature:	Date	
	WHERE KIDS SIMPLY GROW	



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Please fill the time the child will be dropped off and picked up from day care. This will help the center for staff planning.

Drop off time: _____

Pick up Time: ______

Name of the school the child is attending_____

School Start Time: _____

School finish Time: _____

Email: planetkids04@gmail.com

Phone: 780-424-8117



Guidelines for transportation of children to and from school:

Authorized persons to whom the child may be released:

	authonization form	
Parent Signature Date	Staff Signature	
Field Trip		
Parent signature Da	ate	
Immunization Record		
Is your child's immunization up to date?		
Medical Attention		
I release Planet Kids Daycare for liability for accidents or illnesses occurring while my child is in the Centre. In the event of an emergency when I cannot be reached, I give my permission for any medical procedure deemed necessary by my doctor or by another physician selected by the Centre. I understand that I remain responsible for expenses incurred by this attention.		
Parent SignatureD	ate	
с —		
Transportation Policy		
transportation will be on site at plus or minus five minutes of the	m and the drop off is at pm. Please be advised that the ne above time. Since it is important for you that I maintain this time essly. My waiting time is TWO MUNITES and if I do not see any ir own arrangements for the child to get to the daycare.	
The pickup service will only be disrupted if the weather condit soon as possible.	ons are extreme. Should this ever happen you will be informed as	
Please note that the daycare van has INTRA-PROVIINCIAL OPERATING AUTHORITY CERTIFICATE and is insured for child transportation. Should you require further information please contact day care number which is forwarded to one of director 24x7.		
Parant Signatura	Date WHERE KIDS SIMPLY GROW	
Parent Signature:5	DateWHERE KIDS SIMPLY GROW	



Information Release Agreement

_____, give permission to display my child's name

on the following:

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- My child's cubby and coat hook
- My child's pictures on posters showing various activities
- Any art work
- Any birthday related activities
- Allergies list
- Field Trip Permission form and List
- School List i.e. Listing name, phone # parent name, teacher name, school name etc
- Materials brought from home
- Medication Information
- Or any other place as may be suited by the room staff or director of the daycare for while I have no objection at all.

Comments if any you would like to give or share with us:

Policies and parent hand book are read and understood by us and we know where they are kept.

Child's Name:

Parent's signatures:

Date: _____

If you have any question, query or concern please contact director by any means who is available 24x7

Name of Child: _____





Name and location of School: (which the child is attending)

Who is responsible for transporting the child? (Program, Parent, Child, School bus etc.)

Planet Kids Daycare Mode of Transportation: Program Vehicle (DAY CARE VAN)

Time and location for drop off and pick up: (meeting place to be specified, e.g., inside the main school door, outside)
Drop off @______ at the main entrance inside the school building.
Pick up @______ at the main entrance inside the school building.
Supervision starts @______

Responsibilities of the parent and the license holder regarding the transportation.

Parent's responsibility to inform the childcare facility of any change, deviation to plan, emergencies (e.g. child sick): <u>Parents should notify program.</u>

Procedures to ensure child is supervised when being dropped off at the school before school start time. <u>Staff makes sure that the children enter the school building and drop him/ her inside the office</u>. The staff on supervision at school is notified when the children are dropped off.

Procedure to find out the whereabouts of the child if he/she does not show up at pre-determined location at pick up time: Program phone school office to have child get paged and school phone and notify program whether child is present in class or not. Program also phone parent to confirm. If unable to locate child call 911.

Procedure in place if child is detained due to school activity: for instance, should a second trip be made to pick up the child: <u>parents should notify program with regards to the activity of the child after school and no other trip will be made after pick up schedule.</u>

Procedure in place that centre vehicle is involved in an accident: <u>school will be informed of that</u>, <u>and alternate arrangement will be done</u>.

Parents Signatures_____

PARENT ORIENTATION CHECKLIST



WHERE KIDS SIMPLY GROW

Welcome to Planet Kids daycare. We understand that the enrolment process can be a confusing time for new parents and children, so we have compiled a checklist to assist in the orientation process. This, we hope, will help you all to settle in and enjoy the Day Care and Out of School Care experience.

Do you know?

 \Box - How to sign in & out of the "sign in sheets" in the reception area/ their respective rooms?

- \Box The opening & closing times of the centres?
- \Box The procedure when you arrange for someone else to pick up your child?
- \Box What to do if your child is absent or running late?
- \Box The centre's phone, fax or email address?
- \Box Where the centre policies are kept?
- \Box Who to approach to find out details of your child's progress?
- \Box How to pay your monthly fees in advance to avoid a late fee?
- \Box Where to find & how to fill out medication forms? Where to put medication?
- \Box Where the menus are displayed?
- \Box Where to park & where parking is not permitted?
- \Box Where to find program information?
- \Box Where to find any messages or notices?
- \Box Who to see if the office is unattended?
- \Box When rest / sleep times are & what the policy is?
- \Box Where to find out about your child's day?
- \Box What is an accident / incident form?

-----Winter vacation will be for two weeks, which will be according to school closing dates issued by Edmonton Public School Board.

Centre specific information

Your centre Directors are:

Your child's Teacher is:	, and your child's Room is:	ages
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group within this room are: _____

If you have any further question or queries, please do not hesitate to ask.

Parent sign	ı :	
Date	:	
Directors S	ign :	
Date	:	

PLANET KIDS DAYCARE



Business Name: Planet Kids Daycare 11517 105 Ave Edmonton, AB T5H 3L8

Description of services being provided: Childcare services provided by Planet Kids Daycare.

Charges for the services to Customers: Price \$ _____ per month to be paid 1st day of every month.

*One-month notice, and childcare payment for that remaining month must be provided in order to break the agreement.

I ______ hereby declare that the information provided by me in the Registration form of Planet

Kids Daycare is true and to the best of my knowledge and belief.

Also, I have read and understand policies of Planet Kids Daycare written and provided to me in their Parents

Handbook.

Signature: _____

Date:_____