



## Registration Form

### Preferred Start Date:

**Child Name:** \_\_\_\_\_ (Boy/Girl)

Birthdate (year/month/day): \_\_\_\_\_ S.I.N Number : \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Language spoken at home: \_\_\_\_\_

### Please check the age group you want

- Infant/Toddler (under 3 yrs)     Preschooler (3 – 5 yrs)

### Type of care wanted (Circle all that apply)

- Full-time                       Part-time

### Amount of Care (Circle all days required)

- Monday     Tuesday     Wednesday     Thursday     Friday

### Parent/Guardian (person to be contacted 1st)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ (if different from

child's) Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Email: \_\_\_\_\_

### Parent/Guardian (person to be contacted 2nd)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ (if different from

child's) Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Email: \_\_\_\_\_



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**Persons authorized** to pick up child or be contacted in an emergency

I hereby authorized the following people (Name, relationship, and phone number) to pick up my child \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_

**Persons unauthorized** to pick up child or be contacted in an emergency

I hereby DO NOT authorized the following people (Name, relationship, and phone number) to pick up my child \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_



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## 2024 - Repayment Agreement Policy

Hellokids Childcare Center's fees are payable in advance and are due on the **first of each month**. All payments are via e-transfer to: [hellokidsdaycare@gmail.com](mailto:hellokidsdaycare@gmail.com)

### Fees that are non-refundable:

- \$125.00 registration fee paid at time of registration
- Late payment fees- \$25/day after 1<sup>st</sup> of each month
- Late pickup fees- \$25 for every 15 minutes after 5:30pm
- No show fees- no absent report (absent reports must be received before 7:30am)
- Your deposit, if a withdrawal notice has not been given in a timely manner (minimum **two month** notice prior to withdrawal date).
- If we receive your withdrawal notice before the date your enrolment starts
- Monthly fees if a child is immediately withdrawn from the center regardless of withdrawal reason
- Sick days, holidays, daycare closures (including but not limited to statutory holidays, emergency closures, etc.)
- Winter and any other seasonal break

### Fees that are refundable:

- Your deposit - if a withdrawal notice has been given in a timely manner (minimum two-month withdrawal notice)
- If Hellokids Childcare Center cancels your registration, prior to your start date, due to any unforeseen circumstance, your deposit and registration fee will be returned. Hellokids Childcare Center will provide 30 days' notice for any changes to your registration.
- If Hellokids Childcare Center cancels your registration due to conflict of interest, lack of respect for daycare policies, or you are asked to withdraw after a period passes, and our childcare center is unable to meet the developmental, emotional, and physical needs of your child (we assess children daily and the safety and happiness of all children is our priority). In this case, your deposit will be returned immediately.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_



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## CHILD'S INFORMATION

The following information about your child will help us to get to know him/her quickly and to plan a program to enrich the daycare experience. Please be aware that all information will be regarded as confidential.

Child Name : \_\_\_\_\_

### Personal Background

Has child had previous experience away from home?  Yes  No

If yes, please explain (Name of Program, Dates Attended, Reason for Leaving)

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Is there anything special that we should know about your child which help us to understand your child? (Characteristics, qualities, moods, temperament)

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Siblings (Name and Birthday)

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Describe how you feel he/she relates to

Parent \_\_\_\_\_

Other adults \_\_\_\_\_

Other Children \_\_\_\_\_

\_ Strangers \_\_\_\_\_

Favorite activities/toys \_\_\_\_\_

Form of discipline (if any) used at home \_\_\_\_\_

\_\_\_\_\_ How does your child react to discipline \_\_\_\_\_

\_\_\_\_\_

**Health**

Child's Care Card # \_\_\_\_\_ Child's Dental # \_\_\_\_\_

Doctor: \_\_\_\_\_ Phone \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone \_\_\_\_\_

Has your child attended a child health clinic? \_\_\_\_Where? \_\_\_\_\_

Does your child have any health problems such as: Diabetes, Frequent Ear Infection, Asthma, Hearing Loss, Allergies, Heart Conditions, Vision Problems, Seizures, Kidney or Bladder Problems, Other \_\_\_\_\_

Does any other family member have any of the above health problems?

Please comment \_\_\_\_\_

**Child's Immunization History**

- I confirm that my child's immunizations are up-to-date.
- My child's immunizations are not complete, but I plan to bring him/her up-to-date.
- My child is not immunized because of personal preference.



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**Eating and nutrition:**

Please list your child's normal feeding/meal time

\_\_\_\_\_

Your child's favourite food: \_\_\_\_\_ Least favourite: \_\_\_\_\_

Any ethnic or religious observations related to food?

\_\_\_\_\_

**Sleeping Habits:**

Does your child sleep alone? \_\_\_\_ Does he/she sleep well? \_\_\_\_

Please list your child's usual sleep time

\_\_\_\_\_

**Toileting:**

Is your child toilet trained? \_\_\_\_ Normal frequency of bowel movements \_\_\_\_\_

Special words for urination: \_\_\_\_\_ Special words for bowel movement: \_\_\_\_\_

**General:**

How do you feel about your child starting daycare? \_\_\_\_\_

Any fears i.e. vacuum cleaner, beards, etc. \_\_\_\_\_

Is there a reason, other than being working parent, that the daycare is needed?

\_\_\_\_\_

What do you hope your child will gain from being in daycare?

\_\_\_\_\_

Do you know any other parent/child/staff in the centre? \_\_\_\_\_

**Date of Interview** \_\_\_\_\_ **Date of Enrolment** \_\_\_\_\_

**Signature of Director** \_\_\_\_\_ **Signature of Parent/Guardian** \_\_\_\_\_



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