



Right Start Daycare

Right Start Daycare Application

Name of Child:	Date of Birth:
Address:	Start age in Daycare:

PARENT/GUARDIAN AND FAMILY INFORMATION

Mother:	Father:
Address:	Address:
Phone #:	Phone #:
Email:	Email:
Employer:	Employer:
Work Address:	Work Address:
Work #:	Work #:
Hours of work:	Hours of work:
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Separated/Divorced <input type="checkbox"/> Other	
To whom may we release the child? (Picture Identification will be required on initial pick up)	
Is anyone NOT allowed to access the child? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes please specify:	
Name of sibling 1:	Age:
Name of Sibling 2:	Age:
Name of Sibling 3:	Age:

Emergency Contact Information

Name of Contact 1:	Name of Contact 2:
Relation:	Relation:
Address:	Address:
Phone #:	Phone #:
Secret password to identify an alternate contact when emergency contact unavailable:	

~CHILD'S PROFILE~

Eating Habits

How would you describe your child's eating habits? 0 Good 0 Fair 0 Poor
Does your child have any diet restrictions? 0 Yes 0 No
If yes, please specify:
Is there anything else we should know about what/how your child eats? 0 Yes 0 No
If yes, please specify:

Sleeping Habits

What is the usual time and duration of your child's nap?
What time does your child normally awake in the morning?

Self Help Habits

Is your child able to wash him/herself? 0 Yes 0 No
Is your child able to dress him/herself? 0 Yes 0 No
Is your child toilet trained? 0 Yes 0 No
Does your child have toilet accidents? 0 Yes 0 No
Are there any special terms use to describe urination?
Are there any special terms used to describe bowel movements?

Play Habits

What activities does your child enjoy most?
Does your child have a favorite toy? 0 Yes 0 No
If yes, please specify:

Does your child have any other interests? 0 Yes 0 No
If yes, please specify:

Other

Does your child have any fears? 0 Yes 0 No
If yes, please specify:
Are there any other concerns affecting the care of your child? 0 Yes 0 No
If yes, please specify:

~HEALTH RECORD~

Name of Child's Doctor?
Address:
Phone #:
Alberta Health Care Number:

Copy of Child's immunization record is required. Date received: _____

Childhood Illness

Which of the following has your child experienced?	
Measles?	Head Injuries?
Rubella (German Measles)?	Accidental Poisoning?
Mumps?	Fractures?
Chicken Pox?	Ear Infections?
Whooping Cough?	Bronchitis?
Convulsions?	Other?

Allergies/Medications/Etc

Does your child have allergies? 0 Yes 0 No
If yes, please specify:
Is your child taking any medication on a regular basis? 0 Yes 0 No
If yes, please specify:
Does your child have any medical or emotional conditions require treatment or supervision? 0 Yes 0 No
If yes, please specify:
Has your child been hospitalized? 0 Yes 0 No
If yes, please specify (date and reason):

I _____ (print name) agree with the above statements and verify that all of my child's information is up to date and accurate.

Parent's signature: _____ Date: _____

PROGRAM SELECTION

Program Type (Infant, Toddler, Jr. Preschool, Sr Preschool, B/A school, Part time):	
# of days attending per week:	
Weekly schedule (Days and Hours):	
Monthly Tuition:	
Application Fee: \$150.00	
Approved subsidy amount:	Parent portion to pay:

Parents Notes:

1. I hereby agree to place my kid in Right Start Daycare's program.
2. I understand that if I terminate my child's care and wish to enroll my child again, I will be required to go through the registration and enrollment process at www.rightstartdaycarecalgary.ca again. I will be required to pay the registration fee (non-refundable \$150.00) again.
3. I understand that there is a monthly tuition, which is due on the 1st of the month. If payment is late an additional \$35.00 late fee will be charged and will be required to be paid by pay-pal or e-transfer. I also understand that if all past due balances are not paid within three business days I risk my child's removal from the program. Furthermore, I understand that I am liable for all, if any, overdraft or bank fees that may apply.
4. I understand there is an annual materials fee of \$250.00 due payable in the annual month of enrollment for each of my children attending the center.
5. I recognize, that there are no reduction of tuition for absences due to illness, vacation, school closures, or any other extended absence from the school. I understand that I must give one month's written notice prior to withdrawal of my child from Right Start Daycare, effective on the first of that month OR one month's fee in lieu of a written notice. I understand that there will be no refund for tuition paid in full for the year/months registered at Right Start.
6. That emergency care is given in case of accident or illness.
7. That expenses incurred in giving emergency care will be borne by the child's family.
8. To apply and extend subsidy on time. I understand that I have full responsibility for subsidy approval and without subsidy approval, the whole child care month fee will be charged.
9. To have my child picked up from daycare by 6:00pm each day or to pay a late charge of \$5.00 for each minute after 6:00pm that my child is in the daycare.
10. That my child may use all of the play equipment and participate in all planned activities in the daycare.
11. That the daycare has permission to photograph my child. Photographs will be taken only during typical daycare activities such as play-times, birthday parties, or funny moments. Photographs will be displayed

in the daycare and on our social media page. That the daycare has permission for my child to be on video surveillance as part of their security systems in the facility.

12. NOT to use daycare pictures on personal social media of any kind.
13. The daycare has permission to take my child to and from school.
14. The daycare is not responsible for lost or stolen articles. Very item that you will bring or use in the daycare should be labelled.
15. In case of emergency such as flood, fire, epidemic, and sever weather conditions, Right Start Daycare has the right to refuse any children drop off.
16. Children need to be the clear from cold and flu for 24 hours before they will be permitted to attend.
17. This contract may be terminated by either the parent or the center provider by giving a one month written notice in advance of the ending date. Reasons for a child's care termination may include: inability of provider to meet the child's need, inability of the child to adjust to the daycare, lack of parent's cooperation and inability of parents to abide by contract and policies. In some cases, immediate termination may be necessary. These may include failure of the parent to pay the required fees, health and safety reasons of the children in care (with the final judgement/decision of the director/owners if the child's behavior threatens the physical and mental health of the other children in the center and cannot be modified.) Aggressiveness and inappropriate behavior of the parent towards the staff is not acceptable ad may lead to termination of the child. Termination due to any of these reasons will be the last resort of parents and center staff being unable to resolve the issue together.

By signing this I am stating that I understand and agree with all of Right Start Daycare's written policies.

Parent's signature: _____ Date: _____

Program Supervisor signature: _____ Date: _____