



Rainbow Roots Preschool

"Nurturing Individual Excellence"

Rainbow Roots Preschool

Registration Form

Please Note: All information must be complete before your application can be processed.

Child's Legal Name: _____ **Male** _____ **Female** _____
Surname First Name

Child's Preferred Name _____ **Birthdate** _____
Month/Day/Year

Home Address _____

City/Province _____ **Postal Code** _____

Home Phone _____ **Family Email** _____

Alberta Health Care # _____ **Birth Certificate #** _____

Does Your Child Have Any Medical Concerns? No _____ Yes _____ Please provide details in Medical Information Section

Parent/ Guardian #1 A	Parent/ Guardian #1 B
Name: _____ Relationship to Child: _____ Address: _____ <small>(If different than above)</small> City/Prov: _____ PC _____ Home Phone# _____ Cell _____ Email: _____	Name: _____ Relationship to Child: _____ Address: _____ <small>(If different than above)</small> City/Prov: _____ PC _____ Home Phone# _____ Cell _____ Email: _____
<small>Optional</small> Employer: _____ Bus. Address: _____ Bus. Phone: _____ Bus. Email: _____	<small>Optional</small> Employer: _____ Bus. Address: _____ Bus. Phone: _____ Bus. Email: _____

Medical Information

Emergency Contacts/ Emergency Pick Ups (other than parents):

Name: _____ Phone: _____

Address: _____ P/C: _____ Relationship: _____

Name: _____ Phone: _____

Address: _____ P/C _____ Relationship: _____

Family Doctor: _____ Phone: _____

Are all immunizations up-to-date? _____ If not, please explain below: _____

Please list and describe any allergies your child may have: _____

Will any emergency medication need to be stored in the classroom? (ie.Epipen):

Is your child currently taking any prescription medication: _____ If yes, please

Explain: _____

Does your child have any special needs? _____ If yes, please describe below:

Does your child have any other health-related information that you would like us

to be aware of? _____

I hereby authorize Rainbow Roots Preschool staff to administer emergency care/ First Aid to my child. Except in the case of emergency, staff will not administer medication of any kind.

Mother/ Guardian Signature: _____

Father/ Guardian Signature: _____

Personal Information and Consent

Rainbow Roots Preschool Ltd. respects your privacy. We protect your personal information and adhere to all legislative requirements in compliance with the Alberta Personal Information Protection Act (PIPA). We do not sell or trade information with third parties. The information you provide will be used to deliver services, and to keep you informed regarding the activities of Rainbow Roots Preschool including programming and services, special events, and opportunities to participate in your child's preschool education.

After acceptance, Rainbow Roots Preschool Ltd. has the unrestricted right to use and publish images of the child(ren) listed on this application for yearbooks, electronic reproductions and/or promotional materials in any manner or medium, now and into the future, understanding they will be used with the inherent privacy, safety and security of both students and preschool in mind. Permission is granted to alter or copyright the same without restrictions. At any time, you may choose to remove your permission by writing to Rainbow Roots Preschool Ltd.

Discipline and Illness Policies:

Child Discipline Policy:

The Rainbow Roots Preschool program has an expectation of kindness, consideration and mutual respect between all parties. We strive to enable children to effectively function within a group of their peers and with staff members. Staff may determine that a child requires consequences for negative actions or reactions. If a staff member determines that a child must be disciplined, the staff member must take disciplinary actions that are reasonable in the circumstances.

For instance, If a student demonstrates aggression towards another child, the two students must be separated from one another, and the aggressive student is given a developmentally appropriate consequence. Students are never completely isolated during any consequence. A possible sequence of events might be that a child is asked to stop an activity, speak with a staff member about what has transpired, consider his/her actions, and then apologize as appropriate. The staff member must help the child to better understand the situation and the reason for any consequence. The staff member speaks with the child in terms that he or she understands and redirects the child to more appropriate activities.

Parents will be verbally notified at student pick-up if disciplinary action was necessary for their child's actions during that school day. Parents will be asked to sign an Incident Report that describes any inappropriate behaviours requiring discipline and the consequence authorized by the staff member. If multiple incidents are initiated by the same child during one class period, the child's parent will be asked to remove the child from the class for the rest of the school day.

At Rainbow Roots Preschool, we teach children to “treat others as you would like to be treated”. We guide children to use words and positive actions to express their feelings. Staff members help students to resolve conflicts in a peaceable manner in order to become more responsible friends, classmates, and citizens.

Illness Policy:

Parents/ Guardians are expected to keep ill children away from preschool classes until signs and symptoms of illness have been gone for a period of 24 hours. Before attending class, please ensure your child does not have a fever. For the health and safety of others and themselves, children will not be permitted to attend class while ill or if they have contracted a communicable disease (ie. chicken pox; COVID-19). Alberta Health Guidelines must be adhered to with respect to COVID-19. Please contact our office to **report absences** as early as possible: call/ text 403-875-5696 or email rainbowrootspreschool@gmail.com.

I/ We agree to the policies and procedures outlined above; furthermore, I/ we agree to fulfill all financial obligations relating to the Rainbow Roots Preschool program.

Mother/ Guardian Signature: _____ Date: _____

Father/ Guardian Signature: _____ Date: _____

Family Information

What is your child’s first language? _____

Does your child speak any other language(s)? _____

Which language(s) are spoken at home? _____

Does this child have any siblings? Ages? _____

Please list the names and relationships of all other people living in the child’s home including extended family members. _____

How did you hear about our program? _____

Preschool Program Options

Please Note:

*Children in the 2/3- year old program must be 2 ½ years of age by September 1, 2021

*Children in the 4/5- year old program must be 4 years of age by December 31, 2021

*Children in the combined afternoon class must be at least 2 ½ years of age by September 1, 2021

Program	Schedule	Registration Fee (non-refundable)	Arts Appreciation Fee (non-refundable)	Current Year Program Cost	Program Selection
2.5/3-Year Old Class	Tues/ Thurs <u>9:15-11:30am</u> 9-9:15am drop-off 11:30-11:45 pick-up	\$50	\$45	\$275/mth	
4/5-Year Old Class	Mon/Wed/Fri <u>9:15-11:45am</u> 9-9:15am drop-off 11:45-12pm pick-up	\$50	\$55	\$375/ mth	
Combined Class 2.5-5 Yr. Old	Mon/Tues/ Wed/Thurs/ Friday 12:45-3:15pm (Subject to enrolment)	\$50	Variable (Dependent on # of days)	Variable (Depends on # of days)	

Please note: You are charged the Registration Fee only once. If your child is a returning student, you will not be charged the \$50 fee a second time.

If you are choosing the Combined Class, please indicate in which afternoons you would like to register your child by circling from 2-5 days:

Mondays

Tuesdays

Wednesdays

Thursdays

Fridays

2-Afternoons Program Cost: \$275/ mth (Fine Arts Fee: \$45)_____

3-Afternoons Program Cost: \$375/ mth (Fine Arts Fee: \$55)_____

4-Afternoons Program Cost: \$475/ mth (Fine Arts Fee: \$65)_____

5-Afternoons Program Cost: \$575/ mth (Fine Arts Fee: \$75)_____

Due Upon Registration:

- non-refundable Registration Fee: \$50
- non-refundable Arts Appreciation Fee: Specific to your class choices
- Deposit equal to September's Program Fees (Deposit will be applied to September's fees)

Arrangement can be made for the remaining programming fees to be paid in monthly installments (Sept.-June).

Please be aware that Preschool Programming Fees can be claimed as **CHILDCARE on your income tax return.*

In order to secure a place in Rainbow Roots Preschool, this registration form must be completed IN FULL and accompanied by the following:

1. Photocopy of the child's birth certificate.
2. Photocopy of the child's up-to-date immunization records (optional)
3. Registration Fee, Arts Appreciation Fee and deposit.

Complete Registrations can be delivered during office hours to:

After Hours: Please deliver Registration Forms to the black mailbox near the front door.

West Springs Church

816 78th Street SW (facing 77th St. SW)

Calgary, AB, T3H 6B1

or mailed at anytime to:

Rainbow Roots Preschool

Attn: Admissions

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