



For Office Use

Date and Time Rec'd: _____

Registration/Deposit Rec'd _____

Acceptance Sent Letter _____ Email _____

Confirmed Program: _____

Preschool Registration Form

Please note: ALL information must be completed IN FULL in order to process your application.

Child's Legal Name _____ Male Female
Surname First Name

Child's Preferred Name _____ Birth Date _____
Month/Date/Year

Home Address _____

City/Province _____ Postal Code _____

Home Phone _____ Family Email _____

Alberta Health Care Number _____ Birth Certificate Number _____

Does your child have any medical concerns? No Yes (please detail under "Medical Information")

Parent/Guardian 1

Name _____ Address _____ <small>(if different than above)</small> City/Prov _____ PC _____ Phone _____ Cell _____ Email _____ Did you attend CCS? <input type="checkbox"/> Year(s): _____	Relationship to child _____ Employer _____ Bus. Address _____ City/Prov _____ PC _____ Phone _____ Bus. Email _____
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Parent/Guardian 2

Name _____ Address _____ <small>(if different than above)</small> City/Prov _____ PC _____ Phone _____ Cell _____ Email _____ Did you attend CCS? <input type="checkbox"/> Year(s): _____	Relationship to child _____ Employer _____ Bus. Address _____ City/Prov _____ PC _____ Phone _____ Bus. Email _____
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Please include the following information for anyone you have *authorized to pick up your child*. Please include parents and any others as your child/ren will only be released to adults on this approved list.

Name:	Relationship to child:	Phone Number:

How did you hear about Learning Adventures Preschool? _____

Family Information Please give the names and relationships of the members of your family and/or extended family living in your home (including the ages of siblings).

Which language(s) are spoken in the home? _____

Which language(s) are used by the child? _____

Medical Information

Family Doctor _____ Phone _____

Emergency Contacts (other than parents):

Name _____ Phone _____

Address _____ Relationship _____

Name _____ Phone _____

Address _____ Relationship _____

Are all immunizations up to date? _____ If no, please explain: _____

Please describe any allergies your child has: _____

Will any medication (ex: Epi Pen) be left in the classroom? _____ If yes, please note details: _____

Please describe any other relevant health information (past or present): _____

Is your child on any medication? _____ If yes, please note details: _____

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

I hereby authorize the staff of Calgary Christian School Preschool to administer emergency care to my child. Except in the case of an emergency, staff will NOT administer medication of any kind.

Mother/Guardian Signature _____ **Date** _____

Father/Guardian Signature _____ **Date** _____

Please note: ALL information must be completed IN FULL in order to process your application.

Personal Information and Consent

Please note: ALL information must be completed IN FULL in order to process your application.

The Calgary Society for Christian Education (CSCE) 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 rent, sell or trade Society information. The information you provide will be used to deliver services and to keep you informed on the activities of Calgary Christian School (CCS) and the CSCE including programs, services, special events, funding needs, opportunities to participate and the like, through periodic contact.

After acceptance, the CSCE has the unrestricted right to use and publish images of the child(ren) listed on this application for school publications, 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 school in mind. Permission is granted to alter or copyright same without restriction. Changes to these permissions must be made in writing to CCS.

Discipline and Illness Policies

The Learning Adventures Preschool program has an expectation of mutual respect and consideration between all parties. The children will be treated with kindness, respect and love and that behavior will be encouraged between students and staff. Should a problem arise between students, a staff member will try to help guide the children involved into resolving the situation amicably. Our goal is to help children learn to ask and express their wants and needs appropriately. If a child's behavior is inappropriate, a staff member will speak to the child and explain why their behavior is not acceptable and then help redirect the child to another activity. We believe in helping children in a loving, gentle way to become more responsible for their actions and decisions.

PLEASE NOTE: When children are ill, it is expected that they will not attend preschool for the well being of both themselves and others. Please contact the preschool school office as early as possible by calling 403/242-2896 ext. 358 if your child will not be attending classes, or if your child has contracted a communicable illness such as chicken pox or measles.

Disclaimer: Acceptance into the Learning Adventures Preschool program does not constitute an obligation or condition for acceptance into future education programs at Calgary Christian School.

I/We agree to the policies and procedures outlined and to fulfill all financial obligations relating to the Calgary Christian School Preschool program.

Mother/Guardian Signature _____ **Date** _____

Father/Guardian Signature _____ **Date** _____

Preschool Program Options

Children in the 3-4 year old program must be 3 years of age by September 1. Children in the 4 year old programs must be 4 years of age by December 31.

Please choose from the following programs. You will be notified of your child's class placement when the registration process is complete.

Program		Schedule	Registration Fee <i>non-refundable</i>	Current Year Program Cost <i>excluding registration fee</i>	Program Choice
3/4 Year Olds <i>(must be 3 yrs by Sept. 1)</i>	1 teacher 1 assistant 14 students	8:35 - 11:35 am Tues/Thurs	\$50.00	\$277/mth or \$2770/yr	
4 Year Olds <i>(must be 4 yrs by Dec. 31)</i>	1 teacher 1 assistant 16 students	8:35 am - 12:00 pm Mon/Wed/Fri	\$50.00	\$325/mth or \$3250/yr	
Jr. Kindergarten <i>(must be 4 yrs by Dec. 31)</i>	1 teacher 1 assistant 16 students	8:35 am - 12:00 pm Mon/Tues/Wed/Thurs/Fri	\$50.00	\$520/mth or \$5200/yr	

Due upon registration

- non-refundable registration fee (\$50)
- \$300.00 deposit (will be applied to Program Fees)

Arrangements can be made for 10 monthly payments (Sept - Jun) for the balance of program fees.

This is the current year fee schedule, fees are subject to change for 2021-22.

Please be aware that Preschool program fees can be claimed as childcare on your income tax return.

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

1. Copy of Government Issued documentation (proof of DOB).
2. Photocopy of the child's up-to-date immunization records (if applicable).
3. Registration fee and deposit .

*If you have students registered in the Kindergarten to Grade 12 program(s) at CCS, you may combine payments for your family by making arrangements with the Business Office.



Admissions Coordinator 403-242-2896 ext. 312 or
admissions@calgarychristianschool.com

Calgary Christian School has been educating children since 1963
and offers classes from Preschool to Grade 12 on two campuses.

Visit our website at www.calgarychristianschool.com for more information on our faith-based programs and philosophy.