



Registration Form

Date of Admission _____

Child's name _____

Address _____

Phone _____

Birth date _____

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 _____

Phone #Home/Cell _____

Phone# Home/ Cell _____

Child's Doctor

Name _____ Address _____

Phone _____ Alberta Health Care # _____

Child on any medication at home: Yes _____ No _____ (if yes then what type and what for)

What type _____ what for _____

Allergies (f any please specify) _____

Special Needs or medical concerns (operations)

Immunization Record

Is your child's immunization up to date? _____



Background of Child

Had the child had any of the following illnesses?

Red measles	:	YES/ NO	Convulsions (not epilepsy)	:	YES/ NO
German measles	:	YES/ NO	Epilepsy	:	YES/ NO
Chicken pox	:	YES/ NO	Head injury	:	YES/NO
Whooping cough	:	YES/ NO	Accidental poisoning	:	YES/NO
Mumps	:	YES/ NO	Removal of tonsils	:	YES/ NO
Heart trouble	:	YES/ NO	Eye surgery	:	YES/NO

In the last year had the child had any of the following?

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/ Country/ Language etc. (We believe in multiculturalism and this information is required for multicultural celebrations at daycare)

Language _____ Culture _____ Country _____

National festival of your country and when celebrated _____

Previous experience in day-care _____

How you can involve yourself in our daycare _____

Any other information you want to share which can be considered useful for daycare _____

Social and Emotional

Brothers _____ Age _____ Sisters _____ Age _____

Characteristics of child's personality _____

Signs of child's tiredness _____ Child's fears _____

Discipline at home _____

Child reaction to illness: Will child tell staff? _____

Child's reaction to stress _____ Is the child potty trained _____



Authorized persons to whom the child may be released

Child will not be released to anyone that is not listed on the authorization form, if you want to name anybody please fill the name address and telephone number of those additional pickup authorized personal;

1. _____ 2. _____ 3. _____

Parent's Signature _____ Staff Signature _____ Date _____

Field Trip

I hereby grant permission for my child _____ to accompany his/her group on field trips and neighborhood walks, which staff plans as part of the program. I also understand that I will be informed in advance, verbally, by letter, or by poster on the parent's board, of any field trip.

* Note- This includes transportation to and from school, walking, and vehicle transportation.

Parent's signature _____ Date _____

Immunization Record

Is your child's immunization up to date? Yes _____ No _____

(If it's No what's reason? Also if required you have to provide the details of immunization to the daycare authorities)

Medical Attention

I release Hillview Child Development Centre 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 and I also give them permission to transport my child to emergency if required in their daycare van.

Parent's Signature _____ Date _____

Transportation agreement (for picking kids to and from home)

I release my child for morning pickup and drop off schedule, I agree and understand that the transportation will be on site at plus or minus five minutes of the time agreed and maintain the time mutually agreed, I will make my child ready so that the pickup is done flawlessly. I understand that daycare staff driving van waiting time will be five minutes, and if he/ she do not see any indication he/ she will leave, which means I have to make my own arrangements for the child to get to the daycare, I also understand that it's my responsibility to make my child sit in van tie seat/ car seat belt as required.

The pickup service can be disrupted if the weather conditions are extreme, should this ever happen you will be informed as soon as possible, and this is not a mandatory service by the centre. By signing this you agree and understand that the daycare van stops at different stops to pick up and drop off children to and from home before it reaches home/ daycare, also you relieve daycare of any liability in case of any eventuality/ accident which may occur while transporting children, and assure that you will not fight against daycare/ their insurance company or driver of the van in any court of law in Canada. You are signing this without any undue pressure.

And you know that daycare van has INTRA-PROVINCIAL OPERATING AUTHORITY CERTIFICATE and is insured for child transportation. Should you require further information please contact Surjit Kaur Phone #: (780) 802-8430.

Parent's Signature: _____ Date _____



Policy on Child Development

When children are lacking on some area in developmental areas, the teacher talk to the parent and provide them with resources that can be helpful to them or ask to see their doctor for help. The Daycare center uses nipsing as one of the tool to assess child development. Please provide any child development assessment or interest if you have any particular in your mind to the director or to the staff concerned.

Parent Signature: _____ Date _____

All Parents Please Note the Following:

1. All fees must be paid one month in advance by the 5th day of the month.
2. One month' notice must be given for children leaving day-care, otherwise they have to pay full fee for that month.
3. Hours of daycare are from 7:00a.m. To 6:00p.m. Only. Please phone the daycare if you know you will be delayed in picking up your child. Also there will be an extra charge of five dollars for every 5 minutes late after 6:00p.m. Which should be paid to the staff that stays late?
4. A charge of \$15.00 will be made for N.S.F. cheques.
5. A sick child must not be brought to daycare. It is unfair to your child and the other children. If your child shows symptoms of an illness that we are uncertain of, we will request that you bring a doctor's note stating that your child is able to attend daycare.
6. Children, who are on subsidy and miss a day due to an illness, must have doctors note. This is for your subsidy officer.
7. Holiday parents are allowed ten dollars off their regular fee per week. Maximum three weeks.
8. There is portfolio of child which you can go through if you have time while picking or dropping your child to the centre.

I hereby agree to abide with all the daycare rules and to inform staff of any of my child's problems that may arise in future.

Note: That center has open door policy for any suggestions and inputs.

Parent Signature _____ Staff Signature _____



Information release agreement

I _____, give permission to display my child's name on the following:

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 which 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



Parent Orientation Checklist

Welcome to Hillview Child Development Centre. 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?

- How to sign in & out of the “sign in sheets” in the reception area/ their respective rooms?
- The opening & closing times of the centres?
- The procedure when you arrange for someone else to pick up your child?
- What to do if your child is absent or running late?
- The centre’s phone, fax or email address?
- Where the centre policies are kept?
- Who to approach to find out details of your child’s progress?
- How to pay your monthly fees in advance to avoid a late fee?
- Where to find & how to fill out medication forms? Where to put medication?
- Where the menus are displayed?
- Where to park & where parking is not permitted?
- Where to find program information?
- Where to find any messages or notices?
- Who to see if the office is unattended?
- When rest / sleep times are & what the policy is?
- Where to find out about your child’s day?
- What is an accident / incident form?
- winter vacation will be for two weeks (Christmas Break)
- - One month notice will be required if you want to withdraw the daycare services.

Centre specific information

Email of the centre : hillviewchilddevelopment@gmail.com
 Phone number of centre : 780-802-8430
 Your Centre’s directors : _____
 Your child’s teacher : _____
 Your child’s room : _____
 Age group within this room : _____
 Parent’s signatures : _____
 Date : _____
 Director’s signatures : _____



Sun Screen and Insect Repellent (Bug Spray) Permission Form
 NAME OF CHILD _____

As part of the child care's daily routine, children spend a great deal of time outside. Our belief is that exposure to the outdoors is essential in all areas of a child's development.

During the seasons when UV becomes evident, the staff will apply sun screen before going outside to protect their skin from the damaging rays of the sun.

Depending on the year, mosquitoes can also hinder the enjoyment factor of outdoor play and have the potential to carry disease. In order for children to achieve the fullest potential of outdoor play, the staff can apply mosquito spray to your child, with your consent.

Hillview Child Care provides an SPF of 30 - 60, but if you wish to have your child use his/her own, please indicates below.

Hillview Child Care provides insect repellent (bug spray) that is sensitive to children, with low DEET content, but if you would rather not have insect repellent applied to your child, please indicates below.

Please check off which applies to you:

_____ I authorize Hillview Child Care to use the sunscreen provided by the centre to my son/daughter.

Name of sunscreen : _____ COPPERTON_____

SPF : _____ 60%_____

I would like my son/daughter to use the sun screen I provide.

Name of sunscreen : _____

SPF : _____

Parent's signature **Date**

Please check off which applies to you:

_____ I authorize Hillview Child Care to apply insect repellent with low DEET (N, N-diethyl-3-methylbenzamide) content provided by the centre to my son/daughter.

_____ I do not want my child to have insect repellent with low DEET content applied to my child.

_____ I authorize Hillview Child Development to apply insect repellent provided by me.

Parent's signature **Date**



Children Transported by Hillview Child Development Centre Van or Walking

Name of Child: _____ Grade: _____

School Child Attends: _____ Phone Number: _____

Address of School: _____

School Hours: _____ Early Dismissal Day and Time: _____

Mode of Transportation: _____

Drop of point _____ Pick up point _____

Additional information: _____

Does your child require transportation from Hillview Child Development Centre to school? _____

Does your child require transportation from school to Hillview Child Development Centre after school? _____

Please read each statement and acknowledge.

1. I agree to inform my child's school of transportation arrangements with Hillview Child Development Centre.
2. I have informed Hillview Child Development Centre of my child's scheduled days of attendance & arrival and departure times.
3. I agree to notify Hillview Child Development Centre of any changes to the transportation plan prior to a scheduled arrival or pick-up time.
4. Before school, I understand that Hillview Child Development Centre is responsible for my child from the time he/she is signed into the center until he/she is dropped off at the school.
5. After school, I understand that Hillview Child Development Centre is responsible for my child only from the time he/she arrives at the designated meeting spot at the school to the time he/she is picked from the center by a person authorized to do so.
6. I agree to notify Hillview Child Development Centre well in advance when my child will be absent from the center for any reason.
7. Hillview Child Development Centre agrees to notify me if my child does not arrive after school when expected.
8. I understand that Hillview Child Development Centre will attempt to locate my child if he/she does not arrive as expected after school and I understand that if there is no explanation for my child's absence, Hillview Child Development Centre will follow the missing child procedure (which is there in Transportation Policy) which mean calling School, Emergency Contact person, Calling Police and Licensing will be informed accordingly.
9. I understand that Hillview Child Development Centre can transport my child in day care van in case of severe weather conditions -25 or below with wind chill, rain storm etc. etc. I approve of this arrangement. (for Hillview School Only)
10. I understand that if my child's behaviour while walking to and from the school is consistently problematic and unsafe, parents will be responsible for transporting their child to and from school.
11. I agree to provide my child with the appropriate clothing for prevailing weather conditions.
12. Hillview Child Development Centre agrees to keep the van in safe operating condition and only staff with good driving skills will be used for driving the van.
13. I understand that if the Hillview Child Development Centre van is inoperable, Taxi cabs or a Taxi Van will be used to transport the children to and/or from the school. I approve of this arrangement.
14. I have read, understand and agree to comply with the Transportation of Children to and From Schools Policy and Procedures.
15. Received a copy of this agreement along with Transportation Policy.

Parent/Guardian Signature: _____ Date: _____

Hillview Child Development Centre Director/Supervisor Signature: _____ Date: _____

Thank you for providing the information we need to provide safe transportation for your child