

Child Registration Document

This registration form is a legal document. It must be accurate and complete. Before a child can be registered by a school, the registration form must be completed in its entirety and signed by the parent or guardian.

DATE OF REGISTRATION:	SCHOOL YEAR: 2024/202
Month Day Year	
CHILD INFORMATION: Please print the child's legal surname (last name) and given names below. These are the names on the child's birth if the child uses a different first or last name, there is a space at the end of this section for "preferred names".	n certificate or adoption papers.
Child's Legal Surname Child's Legal First Name	Child's Legal Middle Name
Child's Address City Province	Postal Code Child Home Phone
Child's Alberta Health Care# Birthdate: Month Day Year [General Care# Birthdate: Month Day Year	nder:FemaleMaleOther
Alternate Name to be used (if applicable): []	
Legal Verification – a child cannot be registered without a copy of a legal document that provides proof of legal na Any of the following documents are acceptable to copy: birth certificate, permanent residency document, Canadia If you do not have one of these available, ask the school staff for the "Temporary Declaration of Legal Name and Agorm. Bring one of the legal documents listed above to the school before September 30 th .	n citizenship document, passport, or child visa.
PREVIOUS PRESCHOOL EXPERIENCE: Has your child attended a previous preschool or kindergarten program? If yes, which school? ——————————————————————————————————	
Will your child be attending another school program in conjunction with LCDS? □ Yes □ No If yes, which school? □	
**All LCDS communications will be done by email. Please ensure the addresses given will be checke	d regularly.
Primary Email Address:	
2 nd Email Address:	
OFFICE USE ONLY: Program: AM PM Days Attending: MonTu	uesWedThursFri
Preschool Jr. Kindergarten Kindergarten PUF	ESL Mild/Moderate
The indicated original documents have been provided to the school and copies made:	Fees received at the time of registration:
Birth Certificate: □Received & Copy Made □Returned	□ \$100.00 Registration Fee □ \$100.00 Cleaning Deposit ck
Passport: □Received & Copy Made □Returned Canadian Citizenship document: □Received & Copy Made □Returned	\$100.00 Parent Helper Deposit ck
Residency document: □Received & Copy Made □Returned	\$200.00 Casino Deposit ck
Child Visa: □Received & Copy Made □Returned	\$500.00 Family Fundraising Fee (cash, ck, EMT due by Sept 30 th)
Temporary Declaration of Legal Name and Age form: □Received & Copy Made □Returned	 Monthly fees will be paid by: EMT, post-dated cheques, or cash
Date: LCDS Representative:	
Child Registration Withdrawn: Date:	
Reason for Withdrawal:	



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How did you hear or le	arn about LCDS Preschool	& Kindergarten?	(Please check all whi	ich apply)
□Previous member	□Friend/Relative	□School Website	☐Edmonton Prescho	ool Association Website
□AISCA Website	□Road Sign	□Newspaper Ad	□Independent Kinde	ergarten Website
□Radio Ad	□Social Media Ad	□Flyer	□Google or other se	arch engine
PARENT OR GUARDIAN R If there are two parents or g Please fill in all the required	ESIDENCY INFORMATION: uardians, you are required to fill information.	in both sections below, whethe	er both parents or guardians are	e living together or not.
FIRST PARENT OR GUARD	IAN:			
Relationship to Child: (Ple	ease select one)	Biological or adoptive:	∃ mother □ father	Step: ☐ mother ☐ father
Does the child reside with Surname [n this individual? Yes N	lo First	Name [j
Address (If different from	child's):			
City: [] Prov.: [1	P/C:
Home Phone:] Ce	ll Phone:[Work Ph	one:[]
Work Name: [Worl	« Address:[
Does the child reside with	ease select one)	lo		Step: mother father j
Address (If different from	child's):			
City: [] Prov.: [P/C: []
Home Phone:[l Ce	ll Phone:[Work Ph	one:[]
Work Name: [] Worl	« Address: [
			☐ mother ☐ father	Step: □ mother □ father
		First		1
Address (If different from]
City: [Prov.: [P/C: [
Home Phone:[] Ce	II Phone:[one:[]
Work Name: [] Work	Address:[



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FAMILY BACKGROUND INFORMATION: Are there any family circumstances you wish the school to be aware of?	
GUARDIANSHIP RIGHTS, CUSTODY OR ACCESS RIGHTS Guardians of the child must be identified to ensure each party's rights are respected. If an order exists, affecting guardianship or custody or access rights, a copy of the order will be required to be placed on the child's record. In rare instances a child madesignated as 'protected' if a court issues a restraining order under the Child Welfare Act, the Divorce Act, the Young Offender or similar legislation.	y be
Please indicate if any such document(s) exist: Yes No Type of legal document: Guardianship Protection	
Copy in Child's Record:	_1
Please list at least one (1) Emergency Contact who has your permission to pick up your child in the event of an emergency. (This should be someone other than the child's parents or legal guardian) **If you do not list an Emergency Contact, Child Protective Services will be the emergency contact. 1. Emergency Contact Name &Surname Home Phone Cell Phone Work Phone Relationship to Address:	Child
2. Emergency Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Cell Phone Work Phone Relationship to Contact Name & Surname Home Phone Relationship to Contact Name & Surname &	Child
CITIZENSHIP OR IMMIGRANT STATUS OF CHILD Canadian Citizen Child of an individual who is lawfully admitted to Canada for permanent or temporary residence (does not include tourists or visitor Law fully admitted to Canada for permanent residence Child of a Canadian Citizen International Child (Parent/Guardian residing in another country) Birth Country, if NOT Canada:	s)
CITIZEN DOCUMENTATION Document Expiry Date: Parent Work Visa Month Day Year Parent Child Visa Month Day Year International Child Visa Month Day Year Permanent Residency No date required) Permanent Residency No date required)	



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	blings	Age School They Attend	
Name: Dr. Phone:			
Name: Dr. Phone:			
Name: Dr. Phone:			
Name: Dr. Phone:		1[1[
Name: Dr. Phone:		· · · · · · · · · · · · · · · · · · ·	
General Yes No COVID Yes No Covi	EDICAL INFORMATION: The following in	formation is provided for the well-being of your child	l in the event emergency medical care is needec
covidence of the following illnesses/conditions. Indicate Childhood Illnesses contracted to date. Alds	. Name:	Dr. Phone:	Immunization Status:
ease indicate if your child has had any of the following illnesses/conditions. Indicate Childhood Illnesses contracted to date. Aids		11	General □ Yes □ No
Aids Frequent Headaches Stomach/Intestinal Disorder Anaphylactic Hemophilia German measles Red Measles Red Measles Red Measles Red Measles Cancer Lung/Chest Conditions Scarlet Fever Diabetes Muscular Dystrophy Chicken Pox Epilepsy/Seizures Rheumatism/Arthritis Mumps Mumps Rheumatism/Arthritis Mumps Mumps Hearing Impairment Blind Speech Impairment Blind Speech Delay Severe Expressive Delay Moderate/Mild Moderate/Slight Language Delay Hearing Aide: Yes No Glasses/Contact Lenses: Yes No her Health Concerns or Chronic Conditions (Please explain): Going Medications: (Indicate name of medicine, frequency taken and why your child is receiving it) Going Medications: (Indicate name of medicine, frequency taken and why your child is receiving it)			COVID ☐ Yes ☐ No
Anaphylactic Hemophilia German measles Asthma Kidney Disease Red Measles Cancer Lung/Chest Conditions Scarlet Fever Chicken Pox Muscular Dystrophy Chicken Pox Epilepsy/Seizures Rheumatism/Arthritis Mumps Hearing Impairment Vision Impairment Speech Impairment Deaf Severe Severe Expressive Delay Expressive Delay Language Delay Moderate/Mild Moderate/Slight Language Delay Language Delay Hearing Aide: Yes No Glasses/Contact Lenses: Yes No her Health Concerns or Chronic Conditions (Please explain): P-Going Medications: (Indicate name of medicine, frequency taken and why your child is receiving it) Pergies – Please list any allergies your child may have (Please note symptoms).	ease indicate if your child has had a	ny of the following illnesses/conditions. Indicat	e Childhood Illnesses contracted to date.
Anaphylactic Hemophilia German measles Asthma Kidney Disease Red Measles Cancer Lung/Chest Conditions Scarlet Fever Chicken Pox Muscular Dystrophy Chicken Pox Epilepsy/Seizures Rheumatism/Arthritis Mumps Hearing Impairment Vision Impairment Speech Impairment Deaf Severe Severe Expressive Delay Expressive Delay Language Delay Moderate/Mild Moderate/Slight Language Delay Language Delay Hearing Aide: Yes No Glasses/Contact Lenses: Yes No her Health Concerns or Chronic Conditions (Please explain): P-Going Medications: (Indicate name of medicine, frequency taken and why your child is receiving it) Pergies – Please list any allergies your child may have (Please note symptoms).	Aids	Frequent Headaches	Stomach/Intestinal Disorder
Asthma		<u> </u>	
Cancer Lung/Chest Conditions Scarlet Fever Diabetes Muscular Dystrophy Chicken Pox Epilepsy/Seizures Rheumatism/Arthritis Mumps Hearing Impairment Vision Impairment Speech Impairment Deaf Blind Severe Expressive Delay Moderate/Mild Moderate/Slight Language Delay Hearing Aide: Yes No Glasses/Contact Lenses: Yes No her Health Concerns or Chronic Conditions (Please explain): P-Going Medications: (Indicate name of medicine, frequency taken and why your child is receiving it) Pergies – Please list any allergies your child may have (Please note symptoms).			<u> </u>
Diabetes			_
Epilepsy/Seizures	-		_
Hearing Impairment Deaf Blind Speech Impairment			
	Epilepsy/Seizures	Kneumatism/Arthritis	iviumps
Deaf Blind Speech Delay Severe Expressive Delay Moderate/Mild Moderate/Slight Language Delay Hearing Aide: Yes No Glasses/Contact Lenses: Yes No her Health Concerns or Chronic Conditions (Please explain): Going Medications: (Indicate name of medicine, frequency taken and why your child is receiving it)	Hearing Impairment	Vision Impairment	Speech Impairment
Severe Severe Expressive Delay Language Delay Hearing Aide: Yes No Glasses/Contact Lenses: Yes No her Health Concerns or Chronic Conditions (Please explain): Description of Medications: (Indicate name of medicine, frequency taken and why your child is receiving it) Regies – Please list any allergies your child may have (Please note symptoms).		· ·	Speech Delay
Moderate/Mild Moderate/Slight Language Delay Hearing Aide: Yes No Glasses/Contact Lenses: Yes No ther Health Concerns or Chronic Conditions (Please explain): P-Going Medications: (Indicate name of medicine, frequency taken and why your child is receiving it) Pergies – Please list any allergies your child may have (Please note symptoms).		Severe	Expressive Delay
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n-Going Medications: (Indicate name of medicine, frequency taken and why your child is receiving it) lergies – Please list any allergies your child may have (<u>Please note symptoms</u>).			o
lergies – Please list any allergies your child may have (<u>Please note symptoms</u>).	ner Health Concerns or Chronic Condition	ons (Please explain):	
ergies – Please list any allergies your child may have (<u>Please note symptoms</u>).			
ergies – Please list any allergies your child may have (<u>Please note symptoms</u>).			
	-Going Medications: (Indicate name of	medicine, frequency taken and why your child is rece	eiving it)
	ergies – Please list any allergies your ch	ild may have (<u>Please note symptoms</u>).	
od Restrictions (as per Religious or Personal choice)			
od Restrictions (as per Religious or Personal choice)			
od Restrictions (as per Religious or Personal choice)			
		onal choice)	



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CHILD GROWTH & DEVELOPMENT (The following questions are asked in order to assist in program planning for your child's growth and development)

It is helpful for the teaching staff to know how your child function Please indicate if you have any concerns about your child (e.g. Shetc.).	ns in a class/group. Please list any fears your child may have. y, getting along with others, attention span, behavior, anxiety,
Is your child completely "Toilet Trained"? Yes	No
As per LCDS policies, <u>all children must be fully toilet trained before they or the fully toilet trained before they or the full must be able to recognize and be able to indicate the need cubicle, staff will not assist with wiping or installing a training seat; stoo in diapers or disposable training pants (Pull-Ups). Special circumstances</u>	If to use the toilet. Your child must be self-sufficient in the washroom is are available if needed. It is unacceptable to send your child to school
SPEECH & LANGUAGE DEVELOPMENT	
Is English the child's first language? ☐ Yes ☐ No ☐ If No, what is the property of the child's first language? ☐ Yes ☐ No ☐ If you	imary language spoken in your home? [] answered yes, what are the other languages spoken in your home?
**If English is not your child's first language, they will be considered as a educational supports from Alberta Education. Your child's teacher will co	n English as a Second Language learner and will be eligible for ontact you with further details.
Do you have concerns about your child's speech?YesNo	Has your child been seen by any of the following specialists:
Is your child receiving Speech & Language services through Alberta Health Services?Yes No	Occupational TherapistYesNo Physical TherapistYesNo Speech Language PathologistYesNo
Has your child received funded services through a PUF or mild/moderate program such as GRIT, ABC Head Start, Autism Society, 100 Voices or other Program?Yes No	Vision SpecialistYesNo Child PsychologistYesNo Other:
If yes, please indicate your child's Alberta Education ID#:	
I acknowledge that my child may be screened for hearing, speed delays. I give my permission for my child to interact with, or be Pathologist, Occupational Therapist, Physical Therapist, or Psychologies are any concerns relating to my child's development.	screened by, an LCDS team member (Teacher, Speech Language
Parent or Guardian Signature:	



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GENERAL CONSENT FORMS:

ON SITE ACTIVITY PERMISSION CONSENT FORM

This consent form will cover any regularly scheduled activities that occur daily on or around the school premises such as outdoor play activities, in which you are consenting to have your child participate. The General Medical Consent form conditions below will apply to all activities.

Parent/Guardian Signature:	Date:
Out-of-class-field trips require permission from the parent or guardian for Trip Information Sheet will be posted for parents in the school newsletter trip at least two weeks prior to the event. Before each field trip, please activity details. Transportation for out-of-class fieldtrips will be by Yellov Trip Information Sheet.	and on the school parent information boards for each field read the posted information regarding transportation and
If you have any concerns regarding supervision or activity, please do not of sign-up sheet. Please contact the Teacher or the Executive Director if you	onsent to your child's participation on the field trip need more information regarding field trip supervision.
GENERAL MEDICAL CONSENT FORM	
Parent/Guardian signature on this consent form authorizes the teacher child while in the care of the Londonderry Child Development Society, a facility. Child health insurance and the cost of the ambulance is the reaccompanied by an LCDS staff member at all times until the parent/guardian as soon as possible. All permanent staff members hold of	and to make arrangements for an ambulance to a medical esponsibility of the parent. An ill or injured child will be ardian arrives. Every attempt will be made to contact the
Parent/Guardian Signature:	Date:
CHILD GUIDANCE POLICY Londonderry Child Development Society believes in preventive measures our primary philosophy is to set a good example by modeling appropriate established by developing age-appropriate programming with a wide var prepare for the transition from one activity to another. Classroom behavior expectations are explained, modeled, and reinforced children and modeled by staff members. Positive reinforcement is use practice, we encourage the child to make appropriate choices and to learn Preventative strategies are used to redirect inappropriate behavior. The p the activity. If the inappropriate behavior continues, the child will receive they will be redirected to another activity. If the inappropriate behavior sit in the quiet area under a staff member's supervision for a few minutes. behavior and will remind them of their responsibilities in the classroom. Tunderstanding their emotions. When the child is ready, they will be asked to do a good job when they are at school. In extreme cases, such as hitting, kicking, swearing, abusive language, spit towards another child or staff member, the child will be moved to the quic classroom behavior and will remind the child of their responsibilities in the guidance for understanding their emotions. Parents or guardians will be coto exhibit inappropriate behavior towards others, the board may ask the funds the use of any form of physical restraint, confinement, or isolation child guidance provided must be reasonable in the circumstances.	the behavior. Positive behavior is always encouraged and is riety of activities. Children are given adequate warning to for the children. Expectations are clearly explained to the d to encourage the expected behavior. By following this in how to solve conflicts. Trocess is usually a reminder of the expected behavior for another reminder and if a third reminder is necessary, ontinues, staff will intervene, and the child will be asked to a The staff member will review the expected classroom they may also introduce the child to some guidance for to rejoin the activity and will be reminded that they need the tarea. The staff member will review the expected eclassroom. They may also introduce the child to some ontacted, the child will be sent home. If a child continues amily to withdraw from the program. To be inflicted any form of physical punishment, physical or deny any basic necessity to a child. LCDS staff will not use
Parent/Guardian Signature:	Date:



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USE OF PHOTO CONSENT

Throughout the year, photos of the children may be taken in class by the staff or parent helpers. The photos may be displayed on the school bulletin boards inside and out of the classroom. Photos may be used for child name tags and other teaching materials. Child photos may also be included on private Class Dojo posts or in our monthly newsletter which is distributed to the current LCDS membership each month.

LCDS will NOT post any photos of the registered children to the internet without obtaining permission from the child's parents first. LCDS Staff and parents MAY NOT post group photos of LCDS children on any Social Media website, such as Facebook, Twitter, Instagram, YouTube, etc.; permission from each of the parents of each child portrayed in the photo must be obtained before posting the photo.

P	arent/G	ardian Sign	ature: Date:
To at p	make o	the classroo	CEBOOK and Facebook page exciting and visually expressive, we would like to incorporate pictures of the children om, on fieldtrips, at parties, etc. There will be pictures integrated throughout the website and Facebook rally only include photos of a child from the back unless we have the parent's permission to show their
			to gallery may be available on the secure side of the website. Current members only, would have a side of the website.
p	hoto gali	ery.	whether you would allow LCDS to use pictures of your child on the website/Facebook page or in the mes will not be used in conjunction with the photos.
I	□ do	☐ do not	give my permission for my child's photo to be used in the unsecured public side of the website (integrated throughout the website).
l	□do	☐ do not	give my permission for my child's photo to be used in the secure access part of the website.
I	□do	☐ do not	give my permission for my child's photo to be used on the school Facebook page with their face showing.
I	□do	☐ do not	give my permission for my child's photo to be used on the school Facebook page with their face not visible (ie. blurred or back of head showing).
Pa	arent's S	ignature:	Date

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Personal Information and Privacy Act (PIPA) / Personal Information Protection and Electronic Documents Act (PIPEDA)

L.C.D.S. gathers and maintains information used for the purpose of registration and programming for children and other fundamental activities related to being a child in school. This information is collected and used under the authority of the School Act, PIPA, and PIPEDA. In signing a registration form, all applicants are advised that both the information they provide, and any other information placed in the child's record will be protected and used in compliance with the Education Act, PIPA, and PIPEDA. All information collected from or pertaining to a child will continue to be kept private and confidential, unless otherwise authorized in writing by the parent/guardian. All personal information collected from the parent/guardian in respect to their personal or financial information will be kept private and confidential, unless otherwise authorized in writing by the parent/guardian. The parent/guardian must obtain verbal consent from any second or third party named as emergency contacts and will also be kept confidential and only used for the purpose intended. Access to the membership's personal private information will be limited to the LCDS staff, and the Board of Executives for the operations of the LCDS, in which two of the authorized persons will be present when obtaining such information. The above members will abide by the mandates of the Privacy Policy to ensure that membership personal information is kept private and confidential within the operations of the LCDS. All collected information will be retained for the length of time indicated by the LCDS Privacy Policy as dictated by provincial and federal legislation, and licensing agents. At the end of this period the records will be destroyed, except for that information which will be retained for Alumni and Archive purposes.

In other instances, personal child information is collected and used for authorized programs and activities that are a normal part of school life. These uses, which are listed below, are healthy and vital components of school life and of a well functioning school in which participation of all children and parents/guardians is important.

The following are the uses of personal child and parent information by the staff and board of executives and committees of LCDS that require informed and positive consent prior to collection:

- 1. The use of child's names, photos and comments in the school calendar, newsletter, or other school sponsored publications.
- The taking of individual and class photos and the use of child photos for purposes of identification.
 Individual photos are taken and used for various purposes such as identification cards, and emergency health information sheets.
- 3. The use of child names on artwork or other material displayed at school or at school sponsored displays in the community.
- 4. The use of child names and other important information for the Portable Emergency List and the Membership list.
- 5. The taking of photos and/or videos of classroom or other school activities and their use, by the media or other organizations where children are not interviewed or identified by name.
- 6. The taking of photos and /or videos of classroom, or other school activities (i.e., field trips), where the material will be used within the school.
- 7. The use of child names in listings of awards or birthday recognition purposes.
- 8. The sharing of child names and home phone numbers with parent volunteers for the purpose of contacting parents with reminders for materials, activities or special events, teacher requests for assistance, sharing of information and unusual classroom circumstances.
- 9. The sharing of child names and home phone numbers with the membership to promote social interaction between parents and children.
- 10. To allow volunteers of the LCDS Board of Executives and Committee heads to access parent home phone numbers for the purpose of contacting parents with reminders, changes to information, notice of meetings recruiting assistance, and sharing of pertinent information.
- 11. To allow volunteers of the Board of Executives to contact parents regarding policy infractions or policy concerns.
- 12. To use the yearly membership list for Alumni and Archive purposes.

Please note that photos/videos of school activities that are open to the General Public may be taken and used for purposes within and outside the school community. The school may not restrict such activity at public events. Photographs or videos taken by the media or any other organization, where individual children are identified or interviewed, require a separate specific consent from the parent/guardian. You will be contacted for permission for this to occur.

I hereby consent to the collection and use of information by the LCDS for its operational and administrative purposes, including, but not limited to the uses as indicated by the above document. I understand that LCDS is subject to provincial and federal privacy legislation and has in place a policy on Privacy to ensure compliance with privacy legislation and standards. I understand that I may withdraw my consent for any one or more of the above items at anytime, by providing a signed, written statement of withdrawal to the executive board of LCDS and I understand that the withdrawal of my consent may limit or prevent my child's participation in the LCDS program.

**A complete copy of the LCDS Privacy Policy is available for review upon request. Any Privacy issues or concerns may be directed to the Privacy Officer of LCDS (Liasion) and will be governed according to policy standards.				
Signature of Parent/Guardian	Date			
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LCDS SOCIETY MEMBERSHIP CONTRACT

This AGREEMENT made this day of	of	Year	BETWEEN: LONDONDERRY CHILD DEVELOPMENT SOCIETY ("L.C.D.S."),
AND: (Parent/Guardian Name (PLEASE PRIN	T)		
WHEREAS, the Parent, wishes to register	the child/chi	ldren nam	ed in the attached application form with L.C.D.S also known as (LCDS

WHEREAS, the Parent, wishes to register the child/children named in the attached application form with L.C.D.S also known as (LCDS Preschool & Kindergarten) AND WHEREAS L.C.D.S. has certain membership duties and responsibilities, which must be fulfilled by the parent as a condition of L.C.D.S. accepting such registration; therefore this agreement witnesses that in consideration of L.C.D.S. accepting registration of the child/children named in the attached application form, the parent does hereby agree to and be bound by all of the terms set forth in this agreement.

1. VOLUNTEER COMMITMENT

Parent involvement is part of the L.C.D.S. philosophy and is a mandatory part of your child's registration in L.C.D.S. as per this agreement. All families are expected to volunteer for a position either on the Board of Directors or on a committee. All families will select a volunteer position at the time of registration.

PARENT HELPER

Once per month (approximately), one family member is responsible to perform the parent helper duties in the classroom. The parent is required to stay for the entire duration of class time, AM class 9:00 am - 11:45 am, PM class 1:00 pm - 3:45 pm

- Each family will submit one (1) participation deposit cheque in the amount of \$100.00 (PER FAMILY) (undated).
- If a family misses 2 parent helper days without arranging for someone to attend in their place their deposit cheque will be cashed, and they will be expected to replace the deposit cheque if they wish to remain in the program.
- At least one member from your family must attend the scheduled Orientation Day in September for you and your child.
- The Parent Helper is responsible to supply and prepare in class the designated snack and beverage for all children on this day (~once per month) and is responsible for ensuring it is compatible with the current child allergies, food restrictions and licensing requirements.
- If the parent is unable to attend their scheduled parent helper day, it is the parent's responsibility to find a replacement worker or to switch days with another L.C.D.S. member who attends on the same day as their child (replacement workers may be a 2nd parent, aunt, uncle, grandma, family friend, other L.C.D.S. Member, etc.). The parent must notify the office of this change. Where a family is not able to find a replacement or switch days with another family, the school office may assist with an email to members. LCDS will try to create a list of emergency paid parent helpers from the membership for parents to use if they cannot attend their scheduled day. The parent will be responsible for arranging the emergency paid parent helper and notifying the school office. The scheduled parent is asked to send the scheduled snack along with a beverage and the fee of \$50.00 is to be paid to the emergency worker.

3. CLASSROOM CLEANING

- Classroom cleanings are scheduled three times in the school year. The classroom cleaning is scheduled for August, January, and May. The
 duration of the cleaning is approximately two hours or until all tasks have been completed. Classroom cleaning is a requirement of
 Alberta Health legislation and Alberta Government licensing.
- All L.C.D.S. families are responsible to work one (1) classroom cleaning per family per year. Families will choose their date(s) at
 registration. For families who cannot work an evening cleaning, LCDS will hold one (1) daytime cleaning at the end of the school year.
 LCDS will try to create a list of emergency paid classroom cleaners from the membership for parents to use if they cannot attend their
 scheduled shift. The parent will be responsible for arranging the emergency paid classroom cleaner and notifying the school office.
 The scheduled parent is asked to pay the emergency paid classroom cleaner the fee of \$50.00 for working.
- Each L.C.D.S. Family is responsible for working one (1) classroom cleaning. Upon registration, the Parent shall submit to L.C.D.S. one (1) un-dated deposit cheque in the sum of \$100.00 to be held by L.C.D.S. When the Member has fulfilled their obligation, their cheque will either be returned to them or shredded as per their request.



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4. GENERAL MEETINGS AND ANNUAL GENERAL MEETING

All LCDS Members are responsible for the operational decisions of the Society. LCDS is required by the Societies Act, Alberta Education and AGLC regulation to hold regular meetings to ensure members are informed of the status of the society and to provide documentation of financial decisions for audit purposes.

Members are strongly encouraged to attend these meetings. We do not take a participation deposit cheque for this commitment as we trust our parents to be responsible for fulfilling this commitment.

3 General Meetings are held each year (September, January, and May). One member per family is required to attend each scheduled
meeting. This also ensures quorum is met if there is need for a membership vote and ensures society operations are being carried out
accordingly. Financial decisions can be made at all three meetings depending on the matters to be discussed.

5. FUNDRAISING

LCDS sets a yearly Fundraising Fee. All members are required to either participate in fundraising to raise the fee or opt out by paying the set Fundraising Fee.

- For the fundraising participation option, an undated deposit cheque written for the set amount will be submitted with the registration form and will be held until the commitment has been fulfilled.
- Parents can receive monetary credit towards their fundraising commitment by volunteering to work shifts at the larger events, ie. \$50 for a 2-hour shift at the Silent Auction.
- Employer matching donations (i.e., by directing United Way funds to LCDS, or via an employer's charitable giving program) Corporate
 Donations or Sponsorship would also be considered for fulfilling your Family Fundraising commitment to the Society.

Options for opting out of fundraising:

- Opt out and pay the total set fee (could be paid in monthly instalments or other arranged payments).
- Opt out of half of the set fee, submit a participation deposit cheque for the remaining half; participate in fundraising.
 - Families who choose to opt out or pay half of the Family Fundraising Fee will be issues a tax donation receipt in the amount of the set fee. Receipts will be issued in February for the tax year the funds were received.
- The Family Fundraising Fee will be set each year at the Membership Meeting in January. Members present at the meeting will discuss the fundraising requirements for the coming school year and will decide on the amount of the fee and the fundraising events that will be run.

 All members accept the decisions of the membership at the AGM by signing the registration contract.
- 2 large fundraising events such as a Silent Auction & 50/50 Pub night or Ladies Night or other event, will be planned each year to meet the societies fundraising goals. Smaller fundraisers will be included for members to fulfill their fundraising commitment. The fundraising events may include a 50/50 draw, walk-a-thon, poinsettia or spring flower orders, chocolate sales or specialty food (kielbasa, pizza kits, pierogis, etc.) sales. Fundraising events will be discussed at the January and May (AGM) membership meetings.

7. SCHEDULED CASINO EVENT

- Each L.C.D.S. Family is responsible for working one shift at the scheduled casino event (*only, in a casino year). Upon registration, the Parent shall submit to L.C.D.S. one (1) un-dated deposit cheque in the sum of \$200.00 to be held by L.C.D.S. When the Member has fulfilled their casino obligation, their cheque will either be returned to them or shredded as per their request.
- A member may choose <u>NOT</u> to participate in the scheduled casino event. They may do so by informing L.C.D.S. (in writing), to cash their casino deposit cheque in the amount of \$200 in lieu of working their casino shift. <u>Notice must be provided by September 30th</u> of the current school year.

LCDS will maintain a list of emergency paid workers for parents to use if they cannot attend their scheduled shift. The parent will be responsible for arranging the emergency paid worker and notifying the school office. The emergency paid workers on the LCDS Paid Worker list will be paid \$150 per casino shift. Members are welcome to find their own workers and negotiate their own fee. Failure to find a replacement worker will result in the members participation deposit cheque(s) being forfeited to LCDS and cashed per scheduled shift missed.



Child Registration Document

REFUNDS

- For extended absences, whether due to illness, school holiday or personal/religious holiday/trip, full material fees shall remain due and
 payable and shall not be refunded.
- Should notice of withdrawal be given **prior to August 1**st, all material fee cheques and deposit cheques for commitments which have not occurred shall be returned to the Parent. Any registration commitments which were completed prior to withdrawal, either before August 1st or after, are not transferrable to another family.
- Any fundraising dollars collected and submitted by the member prior to withdrawal, after August 1st will not be refunded and are not transferrable to another family.
- The \$100.00 registration fee submitted with the registration form is non-refundable in the event of withdrawal from LCDS.
- Fees paid in full or in two payments are subject to a 10% administration fee upon withdrawal after August 1st.
- In the event of a major health event (pandemic) and the school must close, the Board will make a fair decision for any refunds to members. The \$100 registration fee will remain non-refundable.

9. WITHDRAWAL FROM THE SOCIETY

The LCDS Preschool & Kindergarten program is not always suited to meet the expectations or needs of every family, or every child's educational, behavioral, or developmental needs.

- Each registered family in L.C.D.S. shall be on a **one (1) calendar month trial basis**. During this trial period, the Teacher may recommend that a registration be reviewed as another early education program may be better suited for the educational/behavioral or developmental needs of the registered child. The Executive Director and the Board of Directors would be advised of such a recommendation. LCDS would inform the parents or guardians of the child with their concerns. The parents or guardians may approach the Board of Directors and the Executive Director for a review of membership. The Board of Directors and the Executive Director in conjunction with the Teacher and Learning Team shall be responsible for the final decision. Should it be necessary to have the child withdrawn from the program during the one (1) calendar month trial period, no monthly material fees shall be forfeited.
- Where a member chooses to withdraw from LCDS of their own choosing, withdrawal after the one (1) calendar month trial period shall require one (1) calendar month's written notice. In the absence of such written notice, the material fee for the following month shall remain due and payable to the Society.

10. LATE PICK-UP POLICY

- ALL members must pick up their child(ren) at 11:45 am and at 3:45 pm. Parents should arrive just before dismissal time and be waiting in
 the hall for their child to be dismissed. The LCDS school clock will be used as the correct time. Any parent who has not arrived to pick up
 their child after the teacher has dismissed all the other children, they will be considered late and will be fined for every minute late
 following the class dismissal time.
- On the parent's first late arrival, a verbal late warning will be given to the parent and documented in their child's file.
- On the parent's second late arrival the parent will be fined for every minute they are late after the class dismissal time. They will be
 assessed a fine of \$5.00 for every minute they are late. The late fee must be paid before their child can attend their next scheduled class.
- Members are expected to call the school to let them know they will be late; the late fee will still apply.
- All late pickups will be documented and will be reviewed at the monthly Board of Directors meeting. Staff members will monitor the
 occurrences and will notify the Board of Directors. If lateness is a regular occurrence for some members, membership may be reviewed,
 and the member may be asked to withdraw from the program.
- In the event we have not heard from the parent or guardian regarding their lateness or absence, and they have not arrived to pick up their child and there are no obvious extenuating circumstances, such as severe weather, the LCDS staff member will begin calling the child's parents/guardians and emergency contacts. If after calling all of the contact numbers and there has been no contact made with the school within 30 minutes of class dismissal, Early Learning and Child Care instructs LCDS to begin contacting Child Protective Services and EPS to report an abandoned child.
- In the event of a field trip where parents are expected to pick up the child from another location or the school at a designated pick-up time other than the regular class dismissal times, the same procedures will be followed as set for regular late pick-up.

10. GROUNDS FOR REMOVAL FROM THE PROGRAM

Any member may be dismissed from the society in accordance with current society policy and bylaws.



Child Registration Document

DECLARATION BY PARENT OR GUARDIAN (Please Print Name) ______ certify that the information in this application and any attachments are true,

correct, and complete to the best of my knowledge and belief. Any information regarding my child's development, health and behavior that has intentionally been omitted will be subject to Board review and possible termination of registration.

I agree to pay the required fees, submit the required deposit cheques, complete each of the Parent membership duties and responsibilities laid out in the bylaws, policies, parent handbook and this contract and are bound by all the terms set forth in this contract for the duration of the school term.

- LCDS reserves the right to request developmental assessments for all prospective registrations before accepting the child's registration in the program. The cost of the developmental assessments will be the responsibility of the prospective registrant's parents. Where the child qualifies for support, and is accepted to the LCDS program, the family will be reimbursed by LCDS from funds received from Alberta Education funding. Acceptance will be dependent upon available registration spots and availability of qualified staff resources.
- L.C.D.S. hereby reserves the right to cancel this agreement at any time if it is in the best interests of the child or the Society.
- L.C.D.S. Preschool & Kindergarten and its registered members will abide by all regulations and requirements set upon their operations by the Alberta Government and its governing bodies.
- Upon registration in the LCDS program, all members knowingly assume the possible risk of contracting the COVID-19 virus or other
 contagious illnesses as they are entering into a public space of their own accord where the virus could be unknowingly present.

**The policies, regulations, procedures, and fees of the society are subject to change without prior notice, if necessary, to keep Society policies in compliance with contracted agencies, Provincial and Federal laws. The Society reserves the right to change curricula, rules, fees, and other requirements, of whatever kind, that may affect members.

in

I have read the contract requirements listed in the LCDS Membership Contract this agreement.	act and hereby agree to and be bound by all the terms set forth
Parent Signature: LCDS Signing Officer:	Date:



PARENT REGISTRATION AGREEMENT

Child's	's Name:	Date:
Please	e read and initial each agreement item.	
1.	allergies/food restrictions, work information for	full, I have included necessary medical information, any myself and spouse, at least one emergency contact with changes for my child or for my personal contact
2.	I will select my family volunteer position and pa	rticipate in the responsibilities for the role
3.	I will submit my \$100.00 non-refundable registing helper, classroom cleaning and casino commit	ation fee and my participation cheques for the parent ments with my child's registration form
4.	I will pay my \$500.00 Family Fundraising Fee _ \$500.00 participation deposit cheque (Ch	or I will participate in fundraising and will submit my oose one option)
5.	I will give my monthly availability for parent hel scheduled parent helper day. If I am unable to worker attend my shift.	per scheduling and will participate in my monthly attend my day, I will arrange to have a replacement
6.		nd participate at the scheduled events. If I am unable to cement worker(s) cover my scheduled shift(s)
7.	I will schedule one classroom cleaning event a attend my shift, I will arrange to have a replace	nd participate in my scheduled shift. If I am unable to ment worker attend the event.
8.	I will schedule one shift for the casino event (in arrange to have a replacement worker for my s	a casino year). If I am unable to attend my shift, I will cheduled shift for the event
9.	When I arrive with my child for class, I will sign inform a staff member that my child has arrived	in on the daily attendance sheet. If we are late, I will, and I will sign the attendance sheet.
10		ild in the hallway or parking lot. I will not leave my child ey have entered the classroom, the play park, or the ng on a fieldtrip
11	 I will provide my written consent and a list of fa up my child, they will be required to show their 	mily members or friends who have my permission to pick ID when picking up my child

12.	I am aware that my child cannot attend class until they are three years of age, and they are self-functioning in their toileting. If my child is having toileting accidents in class, LCDS will notify me, and it may be necessary to hold off on my child's registration until they are capable in their toileting.
13.	In the registration form I have given my permission for LCDS to take my child outside during class time within the property
14.	If there is a field trip planned, I will receive notification through the monthly newsletter and the parent bulletin boards, I must give my permission in advance for my child to attend
15.	I will stay informed of all school information through the monthly newsletter, the parent bulletin boards, email, Class Dojo app, membership meetings, the school policies, and bylaws. I understand that one parent must attend the three membership meetings in September, January, and May. I understand that I must receive approval from the Board of Directors if I cannot attend a meeting. If I miss a meeting without approval, my deposit cheque will be cashed, and I will replace the deposit cheque
16.	If my child shows signs of illness or communicable disease, I will not send my child to school until symptoms have subsided. I acknowledge that the teaching staff may refuse my child's attendance if my child cannot manage their residual symptoms on their own (extremely runny or thick mucus being expelled from their nose, continuous coughing). If my child develops signs of illness or communicable disease at school, I will collect my child immediately upon being notified. If I cannot be reached, my emergency contact will be called to pick up my child
17.	If my child requires immediate medical attention, I give permission to LCDS to administer first aid or obtain emergency medical care for my child. I will be notified as soon as possible. LCDS will not be held accountable for taking such action. I will be responsible for the cost of the emergency transportation. The teacher will stay with my child if the emergency transportation arrives before myself and they will stay with my child until I arrive to relieve them.
18.	I will arrive on time to collect my child at the end of class. I will notify the school if I am late. On my first occurrence of arriving late I will receive a warning. On the second occurrence, a late fee will be charged; my child will not attend class until I have paid the fee. Continuous late occurrences may result in being asked to withdraw from the program. If my child is not picked up within 30 minutes of the dismissal time and the parent or emergency contact cannot be reached, Child Protective Services will be notified
19.	If I must withdraw my child after August 1st, LCDS will require one month's written notice. If I do not provide one month's written notice, I will be charged the next month's monthly fee
20.	I will pay my child's monthly fees on time from September to May by the first day of each month. There are no refunds for missed days for illness or vacation or for days the school is closed for public holidays, professional development days or for unforeseen closure such as weather, power outage, water disruption, flooding, etc. Penalty fees will be assessed for late payment or NSF
21.	I understand there are policies for removal from the program either through my child's behavior/actions or my own. If there is such an occurrence, LCDS will notify me, and I may approach the Board of Directors for a review. The Board's decision will be final
	Parent/Guardian Signature: Date:



Volunteer Positions

Please select three choices for your family volunteer commitment.

□ Paid Casino Worker - \$150 per shift

□ Classroom Cleaning Worker - \$50 per shift

	Positions - No experience required! omputer skills needed, the ability to read, listen and make decisions. Meet once per month either digital or in person.
	President (1 volunteer)
	Vice President (1 volunteer)
	Treasurer (1 volunteer)
	Secretary (1 volunteer)
	Fundraising Chairperson (1 volunteer)
	Board Liaison (1 volunteer)
Comm	ittee Positions - No experience required!
	Legacy Fund Committee (6 volunteers) - The ability to research and send emails or letters.
	Event Committee (8 volunteers) - Organizational skills
	Fundraising Committee (2 volunteers) - Assist the fundraising chair with fundraising events
	Newsletter Coordinator (1 volunteer) - computer skills needed, produces the monthly newsletter
	Website Coordinator (1 volunteer) - coordinates with a 3rd party website manager to make changes as needed.
	Library Coordinator (1-2 volunteers) - enters library acquisitions to the school database, shelves books as needed.
	Parent Helper Scheduling Morning (1 volunteer) - computer skills, creates the monthly parent helper schedule
	Parent Helper Scheduling Afternoon (1 volunteer) - computer skills, creates the monthly parent helper schedule
	Yearbook Coordinators Morning (2 volunteers) - computer skills, creates the school yearbook
	Yearbook Coordinators Afternoon (2 volunteers) - computer skills, creates the school yearbook
	Laundry Volunteers Morning (4 volunteers) - can pick up school laundry, wash, dry, fold, return and put away.
	Laundry Volunteers Afternoon (4 volunteers) - can pick up school laundry, wash, dry, fold, return and put away.
	Social Coordinator Morning (2 volunteers) - assists with school parties and events.
	Social Coordinator Afternoon (2 volunteers) - assists with school parties and events.
	Bottle Recycling (2 volunteers) - takes school bottles to the bottle depot and returns cash & receipt to the school
	Sanitation Committee (2 volunteers from PM Class) - end of day takes garbage out to the bin
	Maintenance Volunteer (2 volunteers) - assists with repairs and storage logistics as needed
	Classroom Monday Morning Set Up (2 volunteers) - arrives early Monday morning, assists with classroom set up
	Classroom Friday Afternoon Set Up (2 volunteers) - end of day Friday, assists with classroom shut down
	llowing positions are paid positions and are not part of the required family volunteer commitment. are interested in joining our paid emergency lists, please check all that apply to you.

☐ Emergency Parent Helper - \$50 per shift



Child Registration Document

PAYMENT OF REGISTRATION AND MATERIALS FEES

- Please select your volunteer commitment choices. A Board or committee position will be chosen by each family from the available positions.
- Please submit 1 (one) \$100.00 (non-refundable) Registration Fee (per family) with registration form.
- LCDS Members have chosen to pay a 1 (one) time Family Fundraising fee of \$500.00 per school year. The fee will be set each
 year at the Annual General Meeting in January. Parents will choose to participate in fundraising or choose one of the opt out
 options.
 - **Parents who choose to fundraise will submit an un-dated participation deposit cheque for \$500.00 to LCDS. The family will agree to participate in the fundraising events of their choice through the year. If at the end of April, the family has not met their full fundraising commitment, they will receive an invoice for the remaining balance to be paid to the school as a donation and a tax receipt will be issued for the donation.

If a family fails to participate in any fundraising, the member's \$500.00 participation deposit will be forfeited to LCDS. A tax receipt will not be issued for unfulfilled fundraising (balance owing on April 30).

Monthly Material fees: can be paid by cash, cheque, or e-transfer (e-transfer to lcds.direct@gmail.com)

The Government Affordability Grant of \$75 is shown in column 3 and will be deducted from your monthly fees in column 2. The required fees are listed in the last column. The Affordability Grant is a yearly contract with the government of Alberta. In the event this program is not beneficial for the operation of LCDS, the contract will be rescinded, and fees will increase by \$75 to the regular monthly fee.

Number of days/week/month	Regular Monthly Fee	Less the Affordability Grant	Reduced Monthly Rate
2 days/week/month	\$175.10/month	\$75.00	\$100.10/month
3 days/week/month	\$262.65/month	\$75.00	\$187.65/month
4 days/week/month	\$350.20/month	\$75.00	\$275.20/month
5 days/week/month	\$437.75/month	\$75.00	\$362.75/month

^{*}Subsidy is not available for the 2 days/week/month through Early Learning and Child Care.

- Jr. Kindergarten Registrations (Monthly fees apply): Child must attend 4 or 5 days per/week/month (see fees above). The child must turn 5 between Sept 1st and March 1st. Kindergarten registrations have priority over Jr. Kindergarten registrations.
 We will confirm Jr. Kindergarten requests at the end of April, registrations will be taken in order of date received.
- Kindergarten Registrations: No monthly fees (Government funded). \$100.00 Registration fee is due at the time of registration. LCDS charges a one-time non-refundable Material Fee of \$450.00. The \$450.00 material fee will be due the first week of school in September). All LCDS registration commitments apply. Where a child turns 5 before Dec 31st and the parent does not want them to attend kindergarten due to developmental immaturity, the child may attend Jr. kindergarten and attend kindergarten the following year.
- Participation Deposits: All families submit the required deposit cheques below, payable to LCDS, with their registration forms:
 - *LCDS does not cash the deposit cheques unless a member is negligent in fulfilling their scheduled membership commitments.
 - **Cancellation or stop payment of cheques will result in the expulsion from the society.
 - > 1 Parent Helper Participation cheque for \$100 (per family) (undated)
 - > 1 Family Fundraising Fee or Participation cheque for \$500 (per family) (undated)
 - > 1 Classroom Cleaning Deposit Cheque for \$100.00 (per family) (undated)
 - > 1 Casino Deposit Cheque, \$200.00 (per family) (undated) (only in a Casino year, even years)
- There will be a \$50.00 charge for all NSF cheques.
- All Monthly material Fees are due by the 1st day of each month and must be received no later than the 3rd day of each month. If the monthly material fees are not received by the end of business on the 3rd day of the month late fees will apply.
- There will be no reduction to the amount of material fees paid due to classes missed from illness, normal school holidays or operations
 or personal/religious holidays.

^{**}Fees can be used towards your taxes for childcare; tax receipts will be issued in February.

^{*}Additional days may be added at any time in the school year — (subject to availability and teacher approval).

^{*}Fees paid in full or in two payments are subject to a 10% administration fee if the family withdraws after August 1st.