



## Erindale Cooperative Preschool Registration Form 2018-2019

Please note this is a Cooperative preschool. We require nut-free nutritious snacks, parent volunteer days, and toy clean-up responsibilities.

Please indicate first and second choices with "1" and "2".

3 yr. old class

Tuesday/Thursday a.m. \_\_\_\_\_ 9:15 – 11:45

Tuesday/Thursday p.m. \_\_\_\_\_ 1:00 – 3:30 (may become 3/4 split based on enrollment)

4 yr. old classes

Monday/Wednesday/Friday a.m. \_\_\_\_\_ 9:15 – 11:45

Monday/Wednesday/Friday p.m. \_\_\_\_\_ 1:00 – 3:30

If we CANNOT place your child in the first choice indicated, you will be contacted. Otherwise, please assume that you have been registered in your first choice.

Please note, once your child is enrolled in an ECP class, he/she cannot be on an ECP waiting list for another class.

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Boy / Girl (please circle) month day year

Address \_\_\_\_\_ Postal Code \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Phone (H) \_\_\_\_\_

Address (if different): \_\_\_\_\_ Phone (W) \_\_\_\_\_

E-Mail address : \_\_\_\_\_ Cell \_\_\_\_\_

Father's Name: \_\_\_\_\_ Phone (H) \_\_\_\_\_

Address (if different): \_\_\_\_\_ Phone (W) \_\_\_\_\_

E-mail address: \_\_\_\_\_ Cell \_\_\_\_\_

Please indicate the preferred method and person to communicate with for our class list:

\_\_\_\_\_

Please indicate the languages spoken at home: First \_\_\_\_\_ Second \_\_\_\_\_

Please note to be eligible for the 3 year old class, your child must be three by November 30, 2018. To be eligible for the 4 year old class, your child must be four by January 31, 2019. Students born in December or January, are eligible for either the 3 year or 4 year old class as they were not eligible for the three year old class the previous year. This gives these children an opportunity to be in both the three year class and a four year class instead of repeating the four year class. It is intended for those parents who know they will be holding their younger children from kindergarten for an extra year.



## Payment Information Structure Sheet

Child's Name: \_\_\_\_\_

\*\*\*Please make all cheques payable to "Erindale Cooperative Preschool" or "ECP"\*\*\*  
 \*\*\*All Preschool Fees are due with submission of Registration\*\*\*

If cost is a barrier to attend ECP, please contact the Saskatoon Preschool Foundation  
 (www.spf.sk.ca/contact) to inquire about financial assistance.

### Cheque #1 - All Registrants Amount Received

\$1.00	Coop Membership fees - new families only	
\$30.00	Registration Fees - non refundable	
\$20.00	Fundraising Fee - non refundable These fees may be included on one cheque with today's date.	
Total Fees Received		\$

### Cheque #2 - All Registrants

Toy Wash Fee: Refundable when wash commitment is complete. Received

\$100.00	Post dated cheque dated May 15, 2019 (this will be returned to you when wash commitment is fulfilled)	
----------	--	--

### Cheque #3 - All Registrants

Criminal Record Check fee: Refundable when a Criminal Record is submitted.

Received

\$100.00	Post dated cheque dated October 15, 2018 (this will be returned to you when your CRC requirement is fulfilled)	
----------	---	--

Tuition Cheques - please choose one session:

### 3 Year - T/Th a.m. Session

			Option Chosen
Option 1	\$1000.00	One payment in full - dated September 1, 2018	
Option 2	\$500.00	½ payment -dated September 1, 2018 (Sept-Dec and June)	
	\$500.00	½ payment - dated January 1, 2019 (Jan - May)	
Option 3	\$200.00	1 <sup>st</sup> payment - dated September 1, 2018 (Sept and June)	
	\$100.00	\$100.00 x 8 postdated cheques (Oct 1, 2018 - May 1, 2019)	

(see over)

3 Year - T/Th p.m. Session

Option Chosen

Option 1	\$1000.00	One payment in full - dated September 1, 2018	
Option 2	\$500.00 \$500.00	½ payment -dated September 1, 2018 (Sept-Dec and June) ½ payment - dated January 1, 2019 (Jan - May)	
Option 3	\$200.00 \$100.00	1 <sup>st</sup> payment - dated September 1, 2018 (Sept and June) \$100.00 x 8 postdated cheques (Oct 1, 2018 - May 1, 2019)	

4 Year - M/W/F a.m. Session

Option Chosen

Option 1	\$1200.00	One payment in full - dated September 1, 2018	
Option 2	\$600.00 \$600.00	½ payment -dated September 1, 2018 (Sept-Dec and June) ½ payment - dated January 1, 2019 (Jan - May)	
Option 3	\$240.00 \$120.00	1 <sup>st</sup> payment - dated September 1, 2018 (Sept and June) \$120.00 x 8 postdated cheques (Oct 1, 2018 - May 1, 2019)	

4 Year - M/W/F p.m. Session

Option Chosen

Option 1	\$1200.00	One payment in full - dated September 1, 2018	
Option 2	\$600.00 \$600.00	½ payment -dated September 1, 2018 (Sept-Dec and June) ½ payment - dated January 1, 2019 (Jan - May)	
Option 3	\$240.00 \$120.00	1 <sup>st</sup> payment - dated September 1, 2018 (Sept and June) \$120.00 x 8 postdated cheques (Oct 1, 2018 - May 1, 2019)	

Registration fees and fundraising fees are non-refundable. We require 30 days notice of withdrawal to preschool prior to the school year starting or your first month WILL NOT be refunded (ie: August 1<sup>st</sup> for September 1<sup>st</sup>).

Whose name would you like to have your 2018 -2019 school year tax receipt made out to?

Name \_\_\_\_\_

Thank you for enrolling in Erindale Cooperative Preschool.



## Erindale Cooperative Preschool

### Preschool Board of Directors

There will be some Executive Board positions available for the 2018-2019 school year. NOTE: Board Executives have first choice for class preference the following year AND are not responsible for a toy clean up in the year they serve on the Board. Please indicate in the space below if you are interested in any board position so that we may contact you.

Executive Board Position \_\_\_\_\_

(to be determined and voted on at future board meeting)

### Room Parent volunteers

The Room Parent is an essential one in a cooperative setting. It takes a minimum amount of time and effort, while providing an important link between parents of the preschool class, their teacher, and the Board of Directors. Please indicate if you are interested in the space below.

Room Rep \_\_\_\_\_

(a person who coordinates volunteers to bring snacks for class parties, etc.).

Other opportunities...

If a parent is unable to fulfill his or her classroom volunteer or toy clean up responsibilities, would you be willing to be paid as a replacement? If so, please indicate in the space below.

Substitute Parent Helper \_\_\_\_\_ (a paid replacement for parent helpers).

Substitute Toy Clean-up Helper \_\_\_\_\_ (a paid replacement for toy clean-up sessions).

Parent Name: \_\_\_\_\_

Phone Numbers: (H) \_\_\_\_\_ (W) \_\_\_\_\_

## Permission to Release Contact Information

Often, preschool parents would like to contact one another to arrange play dates, send invitations to parties, etc. We require your permission to release your child's contact information to other preschool members. Please check the following:

- Child's First Name           \_\_\_Yes   \_\_\_No
- Parents' Names           \_\_\_Yes   \_\_\_No
- Address                     \_\_\_Yes   \_\_\_No
- Telephone Number       \_\_\_Yes   \_\_\_No
- Some years we have been asked by the Dr. John G. Egnatoff School to have our class photos in their yearbook. Do you consent?                     \_\_\_Yes   \_\_\_No
- In the past our board had given a DVD as a year end gift. Will you give your permission for these photos to be released to other families in your child's class?  
                                   \_\_\_Yes   \_\_\_No

Child's Name: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Phone Number: \_\_\_\_\_      Date: \_\_\_\_\_

Please complete the form and return it with your registration form. We would like to have all forms completed with registration so we can release class lists at Parent Orientation in the fall.

Erindale Cooperative Preschool  
Out of School Excursion Consent Form

Child's Name: \_\_\_\_\_

Out of school excursions are an integral part of the teaching and learning processes at Erindale Cooperative Preschool. Students will be taking various excursions throughout the year on purposeful and planned learning experiences. We ask that you sign this form.

I fully understand that all activities will be supervised and that it is expected that student behavior will be the same as it is at school. I hereby give my permission for my son/daughter to take part in the educational excursions planned by his/her teacher throughout the current school year.

I understand that I will be given reasonable notice of the upcoming field trips to be sent home with my son/daughter.

\_\_\_\_\_  
Parent's Name

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

Erindale Cooperative Preschool  
Waiver & Emergency Treatment Permission Form

Child's Name: \_\_\_\_\_

I, \_\_\_\_\_ (parent or guardian), hereby give my consent for my child to participate in all preschool activities and to receive any medical assistance and/or care necessary, if I am unable to be contacted in case of emergency.

Child's Hospitalization #: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

My child is allergic to: \_\_\_\_\_

Other relevant medical information & behavioral concerns: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I agree not to hold the Erindale Cooperative Preschool, its teacher(s), members, or board of directors (teachers, members & board of directors are herein collectively referred to as "members") responsible for any costs, claims, damages, or demands whatsoever including bodily injury, death, consequential damages and direct or indirect damages, including those relating directly or indirectly to the life-saving efforts of its teacher(s) or members, save and except for damages that arise out of the gross negligence or willful and wanton misconduct of the Erindale Cooperative Preschool and its members.

\_\_\_\_\_  
Parent's Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Ph # during school hours

Authorization for Pick-Up

Who is authorized to pick-up your child?

Only Parents: \_\_\_\_\_ (Names)

Other: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

For future class planning, do you have any younger children at home who may attend preschool in the future?  Yes  No If yes, what ages? \_\_\_\_\_