



Shiva Daycare and Program for School Aged children
 121 Millbourne Rd E Northwest Edmonton, AB T6K 1P6
 E mail: info.shivadaycare@gmail.com
 Telephone: 780-463-8755

REGISTRATION FORM

Shiva Daycare and Program for School Aged children

Starting Date: _____

Name of Child: _____ **Name Called by:** _____
 (Last /Middle/First)

Birth Date: _____ **Age:** _____ **Gender:** _____
 (Year/Month/Day)

Child's Address: _____

Subsidy: YES _____ NO _____ **Marital Status of Parents:** _____

Alberta Health Care Number: _____

Child's Physician: _____ **Phone Number:** _____

Does Your Child Have Any Allergies? _____

If, so which symptoms normally occur? Asthma: _____ **Hay fever:** _____ **Hives:** _____

Other: _____

If your child is ill during the day, who should staff call? _____

Is your child's immunization up to date? _____

Mother's Name: _____ **Father's Name:** _____
 (Or Legal Guardian) (Or Legal Guardian)

Address: _____ **Address:** _____

Home Phone: _____ **Home Phone:** _____

Work Phone: _____ **Work Phone:** _____

Hours of Work/Week: _____ **Hours of Work/Week:** _____

Emergency Contact Person if Mother or Father is not Available:

Name: _____ **Relationship to Child:** _____

Phone Number: _____ **Address:** _____

Parent's Signature: _____ **Date:** _____

HEALTH AND DEVELOPMENT INFORMATION

1. List any specific fears of your child:

2. List favorite activities of your child:

3. Describe previous daycare experience:

4. Describe stage of toilet training:

5. What is your child's typical reaction to stress?

6. What is your child's typical reaction to illness?

7. Outline your method of disciplining your child:

8. Does your child have any medical or health problems?

9. Please list any daily medications given to your child:

10. Please share values, beliefs or special celebrations of your family.

CONTRACTUAL AGREEMENT

The legal guardian hereby accepts the following policies and conditions by completing this form and returning it to the daycare. _____ (Please Check Off)

I hereby, grant permission for my child to use all of the play equipments and participate in all of the activities of the daycare. _____ (Please Check Off)

I hereby grant permission for my child to leave the daycare center premises under the supervision of a staff member for neighborhood walks, to play in the daycare and community playgrounds, and/or for field trips in authorized vehicles. _____(Please Check Off)

I hereby give my permission to Shiva Daycare and program for school aged children to apply sunscreen/sun block and insect repellent, which I have supplied or daycare has provided, onto the skin of my child before participating in any outdoor activities. _____ (Please Check Off)

I hereby grant permission for my child to be included in evaluations and pictures connected with the Daycare/ Out of School Care Program. _____(Please Check Off)

I hereby acknowledge receipt of the “PARENT HANDBOOK” and agree to the condition and policies outlined in that handbook and I agree to pay all fees for the Daycare and Out of School Care Services. _____ (Please Check Off)

I hereby grant permission for the staff members on duty to take whatever steps may be necessary to obtain emergency medical care, if warranted. These steps may include, but are not limited to, the following:

1. Attempt to contact a parent/guardian: _____ (Please Initial)
2. If necessary, CALL 911 : _____(Please Initial)

I hereby acknowledge that as legal guardian, I assume all responsibility for any medical expenses incurred in my child receiving emergency medical care. _____ (Please Initial)

I hereby understand that the Shiva Daycare and Program for school aged children will not be responsible for anything that may happen as a result of false information given or pertinent information withheld at the time of enrollment. _____ (Please Initial)

I hereby understand and assume that the Shiva Daycare and Program for school aged children has no liability concerning lost or damaged items such as articles of clothing and toys brought to the Daycare by the child or legal guardian. _____ (Please Initial)

I, _____ have read, and understand all policies and procedures set forth by the Center and I can find them in the “Parent Handbook”.

SIGNATURE: _____ DATE: _____(Signature of Legal Guardian)

SIGNATURE: _____ DATE: _____ (Staff Signature)

GENERAL PERMISSION FOR: _____

(Name of Child)

- **Take my child to the predetermined school bus stop location to drop off my child before school. YES () NO ()**
- **Walk my child after picking him/her up from the predetermined school bus stop location back to the center after school. YES () NO ()**
- **Take my child or children on a walk. YES () NO ()**
- **Take my child for walks in the neighborhood. YES () NO ()**
- **Take my child for walks in the playground. YES () NO ()**
- **Take my child swimming or to the spray park. YES () NO ()**
- **Take photos/videos of my child/children. YES () NO ()**
- **Give an occasional candy/treat. YES () NO ()**
- **Assist my child/children with any toilet training procedures. YES () NO ()**

Other than you, who has permission to pick up your child. Any person not listed will not be allowed access to your child. Anyone other than the parents will be required to show photo identification at pick up. Anyone (including parents) should have proper child restraints for transportation.

NAME/RELATIONSHIP: _____

PHONE NUMBER: _____

ADDRESS: _____

NAME/RELATIONSHIP: _____

PHONE NUMBER: _____

ADDRESS: _____

PARENT/GURADIAN SIGNATURE: _____ **DATE:** _____

Parent Orientation Checklist

Welcome to Shiva Daycare and program for school aged children. 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.

Please check:

- The opening and closing times of the centers?
- 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 and how to fill out medication forms? Where to put medication?
- Where the menus are displayed?
- Where to park and 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 and 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: info.shivadaycare@gmail.com

Phone number of centre: 780-242-9242

Parent's Signatures:

Date: _____

Director's signatures: _____

Date: _____

IMPORTANT

- Each child is enrolled on a month to month basis. One-month prior notice or one month's tuition is payable upon the child's withdrawal from the daycare.

I hereby read and understood the above mentioned statement. Initials: _____

- A registration fee of \$50.00 is payable upon acceptance of this form and is nonrefundable:

Information contained in the registration form is extremely important for the proper care of your child, especially in the event of an emergency situation. Please make sure that the information is correct and up to date. ALL INFORMATION WILL BE KEPT CONFIDENTIAL Any changes to your child's schedule must be reported to the center.

Children Transported by Shiva Daycare's 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 off point _____ Pick up point _____
Additional information: _____

Does your child require transportation from Shiva Daycare to school? _____
Does your child require transportation from school to Shiva Daycare after school? _____

Please read each statement and acknowledge.

1. I agree to inform my child's school of transportation arrangements with Shiva Daycare
2. I have informed Shiva Daycare of my child's scheduled days of attendance and arrival / departure times.
3. I agree to notify Shiva Daycare of any changes to the transportation plan prior to a scheduled arrival or pick-up time.
4. Before school, I understand that Shiva Daycare 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 Shiva Daycare 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 Shiva Daycare well in advance when my child will be absent from the center for any reason.
7. Shiva Daycare agrees to notify me if my child does not arrive after school when expected.
8. I understand that Shiva Daycare 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, Shiva Daycare will follow the missing child procedure (which is there in Transportation Policy) which means calling School, Emergency Contact person, Calling Police and Licensing will be informed accordingly.
9. I understand that Shiva Daycare 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.
10. I understand that if my child's behavior 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. Shiva Daycare 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 Shiva Daycare 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: _____
Director/Supervisor Signature: _____ Date: _____

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