



HIGHROAD
CHILDREN'S CENTRE

**2019-2020
Preschool Application**

Date _____

*A registration fee of \$30.00 per family must accompany this form. Please make the cheque payable to **City Life Church**. This fee is non-refundable unless space is not available. Please note that terms such as "father", "mother" and "parent" refer to the legal guardian(s) of the prospective student.*

Parents' names _____

Student's name _____

I am applying for the following preschool class: You will be contacted within one week to confirm the status of your application.

3 and 4 Year Old AM Class: \$120.00/month

- Monday/Wednesday 9:00 to 11:30 am **OR** Tuesday/Thursday 9:00 to 11:30 am
Child's birth year: _____ Child's birth year: _____

3 and 4 Year Old PM Class: \$120.00/month

- Monday/Wednesday 12:20 to 2:50 pm **OR** Tuesday/Thursday 12:20 to 2:50 pm
Child's birth year: _____ Child's birth year: _____

4 Year old 3rd day option: \$20.00/month (based on availability)

- Friday 9:00 – 11:30 am **OR** Friday 12:20 – 2:50 pm
Child's birth year: _____ Child's birth year: _____

1. Student Information

Male Female Date of admission requested _____

Does your student have aboriginal heritage? Yes No

Name _____
 legal last name first second name called

Primary phone# _____ Secondary phone# _____

E-mail _____

Date of birth _____ Place of birth _____
(Please attach a copy of student's birth certificate)

Home address _____

City _____ Province _____ Postal code _____

Mailing address (if different) _____

2. Family Information

Do you attend church? Yes No if so, which church do you attend?

Father's name _____ occupation _____

Mother's name _____ occupation _____

Marital status: Married Widowed Divorced Separated Single

Student lives with _____

Language spoken at home _____

Are there other children in your family? Yes No

What are their names and birthdates?

Primary emergency contact _____

Phone _____ Relationship to student _____

Secondary emergency contact _____

Phone _____ Relationship to student _____

Family doctor _____ Phone _____

In case of accident or illness I authorize the Centre staff to contact a physician and/or ambulance if a parent or guardian cannot be reached immediately. Yes

I authorize the following people to pick up my child/ren from the Preschool facility:

Name _____ Relationship _____

Phone number _____

Name _____ Relationship _____

Phone Number _____

Name _____ Relationship _____

Phone Number _____

3. Personal Information

What interests, activities and tv programs does your child enjoy?

How does your child react to injuries?

What helps your child recover from setbacks, injuries or upsets?

What kind of physical risks and challenges does your child seek?

Are there concerns in the following areas that the Centre should be aware of?

a. Developmental Skills

Has your child ever been assessed or diagnosed with any type of learning disability?

Yes No

Has your child ever been involved with outside services such as:

IDP, SCD, or any therapies such as OT/PT, SLT Yes No

Do you feel concerned with any areas of your child's development or suspect your child may have ADD/ADHD or anxiety? Yes No

Have they ever been seen by a paediatrician for specific developmental concerns? Yes No

If yes, please explain:

b. Social

Have there been any significant changes in the child's life during the past year (example: move/death/separation)? Yes No

If so, please indicate details: _____

Does your child have any specific fears? Yes No

If so, what are they? _____

Children must be toilet trained in order to attend preschool.

Is your child toilet trained? Yes No

If not, do you feel that he/she will be before preschool starts? Yes No

c. Financial

Has your child previously attended a preschool or daycare? Yes No

If yes, please indicate where _____

d. Medical

Does your child have any allergies, food intolerances or medical conditions? Yes No

Does your child take any prescription drugs on a regular basis? Yes No

If yes, what? _____

e. Miscellaneous

Is there any other information pertinent to your child's registration?

1. Conditions of Registration

Please check the following:

- We have read Highroad Children's Centre Handbook and fully understand the commitment we are making. We agree to abide by the rules of conduct and discipline of the Centre as outlined therein.
- We have enclosed a copy of the student's birth certificate and, if needed, the appropriate documents in regard to citizenship status.
- We have indicated if our child is immunized (please circle): Yes / No / Don't know / Partially
- We have enclosed the registration fee of \$30.00 per family. We are aware that monthly payments are due on the fifth of each month.
These payments must be made **by pre-authorized debit.**

2. Verification

We certify that the above information is true and accurate to the best of our knowledge. We agree with and commit to abide by the information laid out in this application, including the parent commitment. We hereby authorize Highroad Academy to verify all information provided, including but not limited to financial, criminal, medical, and scholastic information. We further authorize any previous Centres our child attended to release any pertinent information requested by Highroad Academy.

Parent Signature _____ *Date* _____

Parent Signature _____ *Date* _____

3. Parent Commitment

Both parents/guardians must initial boxes after each section.

Spiritual and Moral Atmosphere: We recognize the vital and important role that parents and the home fulfill in providing a foundation for the success of our child. We understand and respect the Christian morals and values that Highroad Children’s Centre, under the leadership of City Life Church, seeks to instill and reinforce in our children’s lives. We understand that Highroad Children’s Centre does not tolerate profanity, obscenity in word or action, or disrespect to the staff and leaders of the Centre. The Centre’s conviction is that the Bible is the final authority on all matters of life. We recognize and support the spiritual atmosphere that the Centre’s administration seeks to maintain.

Centre Discipline: We agree to support the Centre policies and regulations and authorize the staff to employ discipline as they deem just, wise and expedient for the training of my child. We understand that the Centre reserves the right, after parental conference, to dismiss any child who fails to comply with the established regulations and discipline or whose parents do not assume their responsibilities to Highroad Children’s Centre.

Centre Participation: We understand that our child is encouraged to take part in class activities Highroad Children’s Centre sponsored trips away from the Centre building. We absolve Highroad Children’s Centre from liability for us or our child in the case of any injury to them at supervised Centre activities.

Financial Responsibility: We commit to assume our scriptural and contractual responsibility to financially support the Centre by paying all tuition and other fees in a timely manner.

Parent Signature _____ Date _____

Parent Signature _____ Date _____