



**& Bragg Creek Education Services Association**

## 2023/2024 Registration Form

- Kindergarten Program (Tues/Thurs 9:00am-3:15pm)  
 Preschool Morning Program (Mon/Wed/Fri 8:45am-11:45am)  
 Preschool Afternoon Program (Mon/Wed/Fri 12:30-3:30pm)

*Please note all children must be independent in the washroom to enrol*

### Child's Legal Name

Surname: \_\_\_\_\_ First: \_\_\_\_\_ Preferred: \_\_\_\_\_

Date of Birth (month/day/year) \_\_\_\_\_ Gender:  M  F

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal code: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Alberta Health Care #: \_\_\_\_\_ Copy of Birth Certificate Attached:

### #1 Parent / Guardian Information

Full Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-mail: \_\_\_\_\_

Address (If different than child): \_\_\_\_\_

### #2 Parent / Guardian Information

Full Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-mail: \_\_\_\_\_

Address (If different than child): \_\_\_\_\_

### Contact In Case Of Emergency (Not residing at child's residence)

Contact Name	Phone	Physical Address	Relationship to Child
--------------	-------	------------------	-----------------------

_____	_____	_____	_____
_____	_____	_____	_____

## Student Medical Information

Alberta Health Care number: \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

If you do not have a family physician, please provide details of the clinic regularly used by your family:

Does your child have any allergies?  Yes  No

If yes, please provide details: \_\_\_\_\_

Is your child on any ongoing medications?  Yes  No

If yes, please explain: \_\_\_\_\_

Are your child's immunizations up to date?  Yes  No  Choose not to disclose

Does your child require Special Needs Services?  Yes  No

If yes, please specify: \_\_\_\_\_

Is there any other relevant health information (past and/or present) that we should know? Is there any additional important information?  Yes  No

If yes, please explain: \_\_\_\_\_

## Citizenship / Immigration Status

Canadian Citizen:  Yes  No (If no, please check appropriate box below)

- Temporary Resident (student has a study permit and living under the care of a legal guardian).
- A child lawfully admitted to Canada for permanent residence must present a permanent residency card.
- A child living in Canada, with a biological or adopted parent who is a Canadian Citizen.
- A child living in Canada, with a biological or adopted parent who has **Landed immigrant Status** or **Study Permit** or **Work Visa**. Proof of parent's documentation and a copy of child's passport required.
- A step-child of a Canadian; student presents passport and study permit. Biological or adopted parent provides passport and proof of application for permanent residency and fee payment to Citizenship and Immigration Canada.
- A step-child of a Temporary Foreign Worker; student presents passport and study permit. Biological or adopted parent provides passport; step-parent provides passport and work permit.

## English As A Second Language (ESL)

A student may be eligible for ESL support when the primary language spoken at home is a language other than English.

Is your child's primary language English?  Yes  No

If NO, my child's primary language is: \_\_\_\_\_ The language commonly spoken at home is: \_\_\_\_\_

**First Nations, Métis And Inuit Eligibility (FNMI)**

If you wish to declare that your child is an Aboriginal student, please specify:

Status Indian / First Nations     Non-Status / First Nations     Métis     Inuit

**Guardianship Rights, Custody Or Access Rights**

Guardians of the student must be identified to ensure the rights of each party are respected. A child may be designated as "Protected" if a court has issued an order under the *Child welfare Act*, the *Domestic Relations Act*, the *Divorce Act*, the *Protection Against Family Violence Act*, or *Child Youth, and Family Enhancement Act* that is predecessor to or a substitute for any of the said Acts. If you child is subject to any such order or agreement, please indicate below and discuss this situation with the school administration. If an order exists affecting guardianship rights or custody or access rights, a copy of the order or agreement will be required for the student's record.

**Does such an order exist?**     Yes     No

If this order affects communication regarding the student to anyone other than the first parent / guardian listed, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**NOTE:** Please inform the Teacher of any situations that may affect your child during the school year, such as birth, death, separation, hospitalization, etc. Also, please notify the Teacher if any change of medication occurs

I certify that the information provided to be true and accurate to the best of my knowledge. If any of the information changes, I will notify the school immediately.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

# The Little Schoolhouse

## Parent Consent and Waiver of Liability

Form must be completed in full and initialled where designated before your child will be allowed to enroll. By signing this form you agree to all of the provisions that follow and acknowledge that these provisions constitute a waiver of liability from The Little Schoolhouse and it's School Authority Bragg Creek Education Services Association ("BCESA").

For: \_\_\_\_\_ ( Child's name)

	<b>Yes, I Agree</b>
I, _____, parent/legal guardian of the child named above, hereby acknowledge that I have enrolled my child in the appropriate program for their age & that my child is independent in the washroom.	(initials)
I hereby grant permission for the child named above: a) to participate in all of the activities organized by The Little Schoolhouse/BCESA; and b) to use all the play equipment owned or used by The Little Schoolhouse/BCESA and Bragg Creek Community Association; and c) to leave the school premises under the supervision of a staff member of The Little Schoolhouse/BCESA for activities in the Bragg Creek neighbourhood; and d) to participate in activities involving bus transportation under the supervision of a staff member of The Little Schoolhouse/BCESA.	(initials)
<b>Cancellation / Withdrawal from the activities of The Little Schoolhouse/BCESA</b> I understand and agree that the registration fee will not be refunded under any circumstance. I also understand and agree that should I wish to withdraw my child from Preschool and Kindergarten activities after Preschool and Kindergarten commences, I am required to give 30 days' written notice to The Little Schoolhouse/BCESA in order to avoid a month payment penalty.	(initials)
<b>I agree not to hold The Little Schoolhouse/BCESA, the Board members, their officers, employees or agents responsible for accidents.</b> When a child participates in an activity organized for Preschool or Kindergarten aged children there is always a risk of personal injury or death, and property damage or loss. I acknowledge that the organizers will not be able to fully supervise, care for, or control the participants involved in Preschool and Kindergarten activities. If anything happens to my child or my child's property in Preschool or Kindergarten activities, I agree not to hold those supervising the activity, The Little Schoolhouse/BCESA, the Board Members, and their Officers, Employees or Agents responsible unless they have been grossly negligent. I realize that I am responsible for insuring my child and my child's property for any loss.	(initials)
<b>I consent to Emergency Medical treatment for my child</b> In an emergency, my child may need medical or surgical treatment. If an emergency occurs, every reasonable effort must first be made to contact me. If I cannot be reached, I give permission to the emergency medical treatment of my child. Any expense incurred for emergency medical treatment under this section will be my responsibility. The organizers may also make any other decisions that are necessary for the care and protection of my child during any activity of The Little Schoolhouse/BCESA.	(initials)
<b>SPECIAL NOTICE:</b> The Little Schoolhouse/BCESA operates a website, <a href="http://www.thelittleschoolhouse.ca">www.thelittleschoolhouse.ca</a> . I hereby give permission to allow The Little Schoolhouse/BCESA to <b>photograph, videotape, or audio tape</b> my child for advertising or use on the website.	(initials)
I hereby give permission to The Little Schoolhouse/BCESA to <b>publish my child's full name, address &amp; phone number</b> for the purpose of providing class lists to currently enrolled families.	(initials)

**I have read this document and accept its terms and I agree that this agreement will constitute a complete release of liability for The Little Schoolhouse/BCESA subject to the provisions above.**

Printed name of Child's Parent / Guardian \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_