

(Please print very clearly)
Enrollment Contract For the School Year: 2011 / 2012

Name of Child: _____
Last Name(s)
First Name
Grade in Sept. 2011

Mother's Name: _____
 & Address: _____
Last Name
First Name
Social Insurance Number
(obligatory for tax receipts)

No. Street Apt.# City Postal Code

Telephone: _____ ext. _____
(Home)
(Work)
(Cell)

Father's Name _____
 & Address: _____
Last Name
First Name
Social Insurance Number
(obligatory for tax receipts)

No. Street Apt.# City Postal Code

Telephone: _____ ext. _____
(Home)
(Work)
(Cell)

Child's Date of Birth; _____ / _____ / _____
Year / Month / Day
Sex
Languages spoken and understood

Child resides with: _____
Both Parents
Mother only
Father only
Shared Custody (please ask for a calendar)
Other:

Child's Medicare Number: _____

Particular Health Problems: (details) _____

Does your child have any emergency medications at school? If so, where are they kept? _____

If so, what is the procedure for use? _____

(If your child is prescribed an Epipen, one must be provided and kept in the daycare office for quick access.)

Please circle to indicate your authorization:

I give permission for the daycare staff to apply sunscreen to my child, and will supply the sunscreen. **yes** **no**

I want my child to start homework at daycare. **yes** **no**

I wish my child to **continue** his/her homework beyond the 30 minute period if it is still incomplete. **yes** **no**

I will provide all changes in the above information in writing to the daycare staff.

I wish to register my child as:

A 'regular' Sherbrooke Elementary Daycare student (3 – 5 Days per Week):
(Please circle the desired blocks: morning afternoon)
(Please circle the days desired: M T W Th F)

An 'occasional' Sherbrooke Elementary Daycare student (1 or 2 Days per Week):
(Please circle the desired blocks: morning afternoon)
(Please circle the days desired: M T W Th F)

A 'sporadic' Sherbrooke Elementary Daycare student (reserve at least 24 hours in advance).

I wish to register my child for the following Pedagogical Days (calendar available June 2011):

- All PP days

- Specific PP days: _____

I am aware that this is a legal binding contract, terminating at the end of the 2011 – 2012 School Year.

I have read, understand and agree to the terms of contract as explained in the Sherbrooke Elementary School Daycare Policy Handbook.

I authorize the staff of Sherbrooke Elementary Daycare to seek medical attention for my child in the event of emergency.

I agree to pay for my child's daycare space and services beginning on my child's first day of daycare which will be:

Start Date (_____)

(You may write "***First Day of School***")

Parent Signature: _____

Date : _____