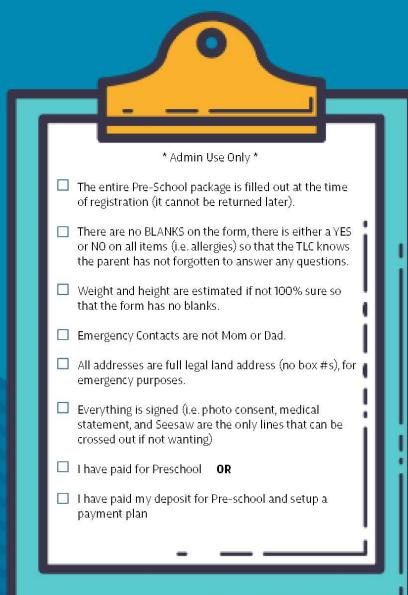
Registration Form					
Date:			<u>-</u>		
Child's Nam	ne:		Age:		
Parent's Name:			Day	Phone No:	
Please circle	e or highlight	the class you	would like to registe	er in:	
2020 - 20	021				
3-4 Years	49402 49403	M/W Tu/Th	Sep 14-Jun 16 Sep 15-Jun 17	9:00-11:30 AM 9:00-11:30 AM	
4-5 Years	49405 49406	M/W Tu/Th	Sep 14-Jun 16 Sep 15-Jun 17	9:00-11:30 AM 12:15-2:45 PM	
2021 - 20	22				
3-4 Years	51107 51108 51109	M/W Tu/Th Tu/Th	Sep 13-Jun 15 Sep 14-Jun 16 Sep 14-Jun 16	9:00-11:30 AM 9:00-11:30 AM 9:00-11:30AM	
4-5 Years	51110 51111	M/W Tu/Th	Sep 13-Jun 15 Sep 14-Jun 16	9:00-11:30 AM 12:15-2:45 PM	
Payment Te	erms:	Pay in Ful	I Payment	: Plan* 🔲	
*If you have	chosen Paymeı	nt Plan please co	omplete the <u>Payment F</u>	Plan Agreement Form.	
OFFICE USE C	DNLY				
e received:					
istration comp	oleted by:				
e of registration	on:				



Registration Package





PARTICIPANT INFORMATION FORM

Child's name:			Sex: M \square F \square
Date of birth (DD/M	M/YY):		Age:
Hair color:	Eye color:	Height:	Weight:
Address:			
City:		Postal Co	de:
Mother's name and	email:		
Mother's address:			
City:		Postal Co	ode:
Home phone numbe	r:	Cell numl	ber:
Work phone number	r:	Ext:	
Father's name and e	mail:		
Father's address:			
City:		Postal Co	ode:
Home phone numbe	r:	Cell numl	ber:
Work phone number	r:	Ext:	
Emergency contact #	1 (Cannot be mom or dad	l, must be full address, n	ot box #):
Name:		Relations	ship to child:
Address:			
Home phone numbe	r:	Cell numb	ber:
Emergency contact #	2 (Cannot be mom or dad	l, must be full address, n	ot box #):
Name:		Relations	ship to child:
Address:			
Home phone numbe	r:	Cell numl	ber:
	is NOT legally authorized	to pick up your child? Y	Yes 🗆 No 🗆
(If yes, please provid	le court documents).		



MEDICAL INFORMATION Alberta health care number: Other coverage: Family doctors name:_____ Clinic: Telephone number: No \square Is your child up-to-date with vaccinations? Yes **Allergies:** Does your child have any food or other allergies? Please list. **Health Concerns:** Does your child have any illnesses, learning disabilities, behavioral issues or any other medical conditions? Please list. **Medication:** Is your child on any medications? Will your child be taking medication during the program? Please list.



Photo Release: The undersigned hereby grants the TransAlta Tri Leisure the rights and permission to take and publish still photographic tri Leisure Centre. These pictures may be used in publication and website or in any other manner for the purpose of control of the purpose of th	graphs and moving videos of my child at the TransAlta ations, audio visual presentations, promotional literature,
Parent signature	Date
Medical Statement: In case of emergency or illness, every effort will be made contact cannot be made, I agree that in case of emerger to my child. Parent signature	
	program may be involved in some of the following ca Tri Leisure Centre facilities, off site trips such as walking tions and safety measures will be taken by program staff.
Parent signature	Date



A LITTLE MORE ABOUT ME...

This part of our participant information form helps us get to know your child a little better and better helps us plan to suit the needs and interests of our children.

Does your child have any fears?
How does your child communicate?
How does your child react to stressful situations?
Have you been to preschool before?
My child has brothers and sisters.
My child's favorite hobby is:
Other activities my child has done at the TransAlta Tri Leisure Centre:
The top three things I would like my child to learn this year are:
1
2.
3
Please provide us with any other information about your child that may help us ease their transition into our program:



CLOSE PROXIMITY PERMISSION FORM

_ authorize the TLC Preschool to take my child(ren)
outside of the TransAlta Tri Leisure Centre
ape or use of the green space east of the building.
ries:
e mentioned outside locations might be spontaneous in
ransAlta Tri Leisure Centre for parent pick up unless
authorize the TLC Preschool to take my child(ren
to the following locations within the TLC:
DATE



TRI LEISURE CENTRE POLICY MANUAL

Child Discipline

All methods of disciplinary action used in the TLC Preschool must be communicated to all parents, staff and children (using developmentally appropriate language) prior to the start of a program. This information will be communicated to staff members by way of orientation package, training and availability of a policies and procedures manual, to parents by way of orientation package and children by way of verbal communication.

Disciplinary actions used in the TLC Preschool are consequential in nature. When a consequence is given, a verbal developmentally appropriate explanation will be given to the child.

Redirection and positive reinforcement are also be used as methods of behavior management and child discipline.

When a disciplinary action is taken by a staff member, the action taken must be reasonable given the circumstance. A staff member may not, for any reason, inflict any form of physical punishment, verbal or physical degradation or emotional deprivation on a child.

A staff member may not, under any circumstance, deny or threaten to deny any basic necessity to a child. A staff member may also not, under any circumstance, use or permit the use of any form of physical restraint, confinement or isolation of a child.

Biting, kicking, hitting, scratching or harming another child or staff member in any way will not be tolerated at TLC Active Kids Preschool. When a child is considered to be causing harm to themselves or another child or staff member, the incident will be documented and the parents of the children will be informed. If harmful behavior continues, the parent will be required to pick up their child immediately for that day and an action plan to move forward will be created and documented. If the child continues to be harmful to other children or staff members and no improvement is made, the parent may be asked by the Children and Youth Coordinator to withdraw the child from the TLC Active Kids Preschool.

I	have read and understand the
TLC Active Kids Preschool Child Discipline policy.	
Child's name:	
Date:	
Signature:	



WITHDRAWAL POLICIES

Cancellations require 1 month writter	n notice, due by the first of the previous month.
Program withdrawals are subject to a	withdrawal fee of 15% on 1 month of the program cost.
l	have read and understand the
TLC Active Kids Preschool withdrawal	policy.
Date:	
Signature:	



Seesaw The Learning Journal

Welcome to our online interactive classroom, Seesaw. This multipurpose app is a digital portfolio that gives you real-time experiences into your child's school day and invites families to keep in the loop about their

children's classroom. The app provides a clear and direct pathway of communication between home and school so that parents never miss a beat.

The Seesaw platform adheres to a strict Privacy Policy that promises to not share or withhold anything placed on the app (web.seesaw.me/privacy/) or share any content with third parties. To ensure information is safe within your classroom, each parent will have

PARENT TEACHER

access only to their child's work. In using Seesaw our teachers will take pictures of your child periodically through the year and share those pictures privately to your families account on Seesaw. Any images or products of your child will only be shared with the child's parents and classroom. We ask that any families in the classroom do not share any photos outside to any third parties.

Nothing gets families more engaged with the classroom then seeing and hearing what their child is doing at school first hand! Our goal is to help keep families in the loop and engaged in your classroom through personalized, easy to use, safe, and visual updates.

We as TLC Teachers agree to adhere to the following:

- Any students we add to your class are current students in your class.
- Any additional teachers we add to your class are authorized by your school to access student journals.
- We will use Seesaw only for classroom purposes and not TLC promotions or property unless otherwise given individual permission or photo release form is signed.
- We will treat Seesaw as an extension of the classroom and take reasonable steps to confirm that students and parents are using Seesaw appropriately.
- We will take reasonable measures to protect access to information contained in student journals and class journals.
- We will only invite parents, guardians, and other trusted adults to view student journals.
- We will protect your class QR code so that access to student journals and class journals is limited only to students and parents, guardians, and other trusted adults

I consent to have myself as the parent and my child, as listed below, to participate in Seesaw with a full understanding of TLC Active Kids Preschools terms of use and expectations.

Student name:	
Parent printed name:	
Parent signature:	Date:
Teacher signature:	Date: