



## Woodvale Playschool Registration Form 2011 - 2012

Class:  3 year     Pre K AM     Pre K PM     Fine Arts

### CONTACT INFORMATION

<b>Child's Name</b>		<b>Gender</b>	<b>Male    Female</b>
<b>What does your child prefer to be called?</b>		<b>Birth Date</b>	
<b>Address</b>		<b>Home Phone</b>	
<b>City</b>		<b>Postal Code</b>	
<b>Alberta Health Care #</b>		<b>Immunized?</b>	<b>Yes    No</b>
<b>Community League</b>		<b>Membership #</b>	
<b>Mother's Name</b>		<b>Home Phone</b>	
<b>Mother's Address</b> <small>(if different then above)</small>		<b>Business Phone</b>	
<b>Mother's Email</b>		<b>Cell Phone</b>	
<b>Father's Name</b>		<b>Home Phone</b>	
<b>Father's Address</b> <small>(if different then above)</small>		<b>Business Phone</b>	
<b>Father's Email</b>		<b>Cell Phone</b>	

<b>Doctor's Name</b>		<b>Doctor Phone</b>	
<b>Emergency Contact</b> <small>(other than parent)</small>		<b>Emergency Phone</b>	
<b>Emergency Address</b>			

<b>Will your child be dropped off by someone other than a parent?</b> <small>(If yes, please provide name, address and phone number of this person)</small>		<b>Yes    No</b>
<b>Name</b>		<b>Phone</b>
<b>Address</b>		
<b>Parent's Signature</b>		

### MEDICAL/PERSONAL INFORMATION

1. **Does your child have any allergies, food restrictions, medical problems, religious, holiday related or custody restrictions we should be aware of?** If no allergies, please write NO ALLERGIES. If yes, please indicate any important information the teachers should be aware of (e.g. EpiPen).

---

2. **Does your child receive any medication on an ongoing basis (either at home or at Playschool)?** If yes, please explain.

---

3. Please list any fears or concerns your child may have (e.g. dark, loud noises).

---

---

4. Where did you hear about Woodvale Playschool?

---

**MEDICAL EMERGENCY WAIVER**

**We, as the responsible party at the Woodvale Playschool, do have permission that the below stated children may be transported by ambulance or other medical emergency vehicle in the event of a medical emergency while in attendance of the Woodvale Playschool Program.**

Children's Names \_\_\_\_\_

\_\_\_\_\_  
Parent's signature Date

**AUTHORIZATIONS**

**I hereby give permission to allow my child, \_\_\_\_\_ to participate in the following:**

- Yes No To leave the Woodvale Playschool licensed premises for a walk around the block, going to the park, or a walk to the ravine, outside for fire drills, etc., as this is a part of the daily program being offered at Woodvale Playschool.
- Yes No To distribute my child's name, address, birthday, parent's names and phone number to the Playschool Executive Members and the Classroom Representative.
- Yes No To publish a parent contact list that includes my name, my child's name and phone number on a password-protected parent area of our website.
- Yes No To publish pictures taken at the Playschool (names would not accompany these pictures).

\_\_\_\_\_  
Parent's signature Date

**PARENTAL AGREEMENT AND GENERAL RELEASE**

I hereby agree to abide by all the Woodvale Playschool Bylaws and Policies. **I understand that I must participate in the required Bingo and other fundraising.** Should I not be able to perform any of these parental duties, **I understand that it is solely my responsibility to arrange a suitable replacement.** I acknowledge that a current Community League Membership of the community in which I reside is also a prerequisite of the Woodvale Playschool. **Should any of these policies not be met, I understand that my child will be asked to withdraw from the Playschool with no refund issued.**

I further understand that juice may be prepared or provided for the children on special occasions in accordance with currently accepted hygienic practices. I understand that Woodvale Playschool accepts no responsibility for the content of these juice items. Therefore, I hereby give my consent to allow my child to participate in this program and partake of the drink prepared.

I hereby remise, release and forever discharge Woodvale Community League, its executive officers and directors, volunteers, and Woodvale Playschool, its executive, teachers and anyone associated with the above named, their heirs, executors, administrators and assigns, of and from action, suits, claims and demands whatsoever at law or in equity which I ever had or now have, or which I, or our heirs, executors, administrators, or assigns hereafter can, shall, or may have reason of any matter arising out of the provision of food and beverage to my child.

**\*\*This form must be completed and signed in order to process registration\*\***

\_\_\_\_\_  
Parent's Name Date

\_\_\_\_\_  
Parent's Signature