

The Chestnut Tree Pre-School Inc., REGISTRATION FORM



Stoney Creek Preschool

Today's Date:	Start Date:	Withdraw Date:
CHILD INFORMATION		
Child's Last Name:	First:	Middle:
Birth date: / /	Age:	Sex: <input type="checkbox"/> F <input type="checkbox"/> M
Street address:		Home phone no.: ()
City:	Province:	Postal Code: Email:
Remarks: (Special Information)		

PARENT (OR) GUARDIAN INFORMATION			
Mother's Name		First:	Middle
Address (if different):		Home phone no.: ()	Cell phone no.: ()
Occupation:	Employer:	Employer address:	Employer phone no.: ()
Father's Name		First:	Middle
Address (if different):		Home phone no.: ()	Cell phone no.: ()
Occupation:	Employer:	Employer address:	Employer phone no.: ()

IN CASE OF EMERGENCY			
Name of local friend or relative (not living at same address):		Relationship to child:	Home phone no.: () Work phone no.: ()
Child's Physicians Name	Physician's address		Work phone no.: ()

Patient/Guardian signature

Date

The Chestnut Tree Pre-School Inc., CHILD DEVELOPMENTAL HISTORY



Stoney Creek Preschool

APPROXIMATE AGE AT WHICH YOUR CHILD

Named Simple Objects	Repeated Short Sentences	Began Toilet Training
Word your child uses for urination		Word your child uses for bowel movement
Does your child have to be reminded to use the washroom? Yes <input type="checkbox"/> No <input type="checkbox"/>		Usual Time for a bowel movement
Is your child...? Right handed <input type="checkbox"/> Left handed <input type="checkbox"/>	What time does your child usually go to bed at nights?	Does your child sleep well? Yes <input type="checkbox"/> No <input type="checkbox"/>
Remarks: (Special Information)		

DIETARY REQUIRMENTS

Is the Family Vegetarian? Yes <input type="checkbox"/> No <input type="checkbox"/>	Other dietary restrictions: (please elaborate)
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SOCIAL & LEARNING DEVELOPMENT

What are your child's favorite indoor activities?	
Does your child have fears that you are aware of?	Does Your child Speak English? Yes <input type="checkbox"/> No <input type="checkbox"/> Other Languages:

If you are interested in your child being considered for the integration program due to an identified special needs. Please use this area to elaborate your concerns:

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Patient/Guardian signature

Date

The Chestnut Tree Pre-School Inc., PROGRAM SELECTION



Stoney Creek Preschool

New Registration

Renewal

Child's Name	Child's Age	Start Date
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PROGRAM PREFERENCE

Class Preference		Mon	Tues	Wed	Thurs	Fri
Class #1	3 Day AM	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
Class #2	3 Day PM	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
Class #3	2 Day AM		<input type="checkbox"/>		<input type="checkbox"/>	
Class #4	2 Day PM		<input type="checkbox"/>		<input type="checkbox"/>	

DEPOSIT – RATES & FEE REQUIREMENTS

Preschool fees must be received before the first of each month, post dated cheques are required. Cheques are to be made payable to The Chestnut Tree Preschool Inc. There is a required \$25 registration fee payable to the centre along with your child's application forms. This amount is refundable up to and including July 31st prior to your enrolment start date, after which no refund will be issued. First and last months fees are required at the time of registration. All childcare spaces are allocated based on 10 months a year (September though to June) with a 2 day a week minimum. All registrations are on a first come first serve bases.

Registration Fee	*required	Amount Included		Attached	
		\$25		<input type="checkbox"/> YES	<input type="checkbox"/> NO
First and Last Months Fees (Sept fee and Last month deposit)	*required	\$		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Eight Post-dated Checks (Oct 01, Nov 01, etc ... to May 01)		\$		<input type="checkbox"/> YES	<input type="checkbox"/> NO

There is a \$25.00 charge for all NSF checks. Annual receipts will be issued for income tax purposes.

FEE GUIDE

Class	Time	Days of Week	Monthly Fee
Class #1 – 3 Day AM	9:00 – 11:30	Monday – Wednesday – Friday	\$245.00/Month
Class #2 – 3 Day PM	12:30 – 3:00	Monday – Wednesday – Friday	\$245.00/Month
Class #3 – 2 Day AM	9:00 – 11:30	Tuesday - Thursday	\$164.00/Month
Class #4 – 2 Day PM	12:30 – 3:00	Tuesday – Thursday	\$164.00/Month

Patient/Guardian signature

Date