

CONSENT FORM

I permit my child to leave the school premises under the supervision of Kings Kids Preschool for nature walks, community playgrounds and outside play. I understand that my child will be supervised at all times.

I understand the risks involved in such mentioned activities. I release Kings Kids Preschool and any of their staff from claims and actions from any accident caused by participation during any activity. Initials: _____

FIRST AID

I permit Kings Kids Preschool to administer the appropriate first aid and/or contact the Emergency Medical Services, if deemed necessary, to transport my child at my expense. Initials: _____

MEDIA

I permit Kings Kids to use my child's photographs and digital and audio recordings within Kings Kids Preschool. I understand that Kings Kids Preschool will protect my child's privacy, and their school work will be identified by first Name only. Initials: _____

Occasionally, we place children's photos on our Facebook page. I consent to show my child's face on the Kings Kids Preschool Facebook page. I understand that only my child's first Name will be used (no last names).

Initials: _____

AGREEMENT FORM

I have received, read and understand the policies and procedures as outlined in the Parent Handbook Initials: _____

I will keep the teacher/administrator informed of situations that develop throughout the year that may affect my child, e.g. death, divorce, or birth of a sibling. Initials: _____

I agree that the tuition fee is due on or before the 1st of each month, even if my child is not attending on the 1st. I understand that **\$10 per week** (or part thereof) will apply. Initials: _____

I understand that the tuition fees may be paid by e-transfer to preschool@kingskidsfoundation.com. We do not accept cheques or cash. Initials: _____

I agree that I will incur late fees (as outlined in the Parent Handbook) if I pick my child up late. The late fee must be paid before your child's next day. Initials: _____

I understand that a 30-day **written** notice is required on or before the first of the month if I choose to withdraw my child. I will forfeit the deposit if sufficient written notice is not given. I also understand there is no refund if I withdraw my child in June. Initials: _____

I understand that I will participate in the fundraising opportunity by raising a minimum of **\$50** in profit per child as outlined by the preschool Administration or choose to pay the fundraising fee of \$50 per child. Initials: _____

I have read, understand and agree to the Enrollment terms.

Parents Signature: _____ Date: _____

Child's Name: _____

General Information About Your Child

Does your child have any fears or anxiety? **Y** **N** _____

What is your child's **favourite** toy or activity? _____

What is your child's **least favourite** activity? _____

List brothers and sisters and their ages: _____

What time does your child go to bed at night? _____ Does your child nap during the day? _____

What language(s) does your child speak at home? _____

What is your family's cultural or country background? _____

Will your child attend preschool with an Aide? **Y** **N** What agency? _____

(Please note that your child may not be able to attend classes without their aide)

Is there anything else you would like to tell us about your child? _____
