



**FOR OFFICE USE ONLY**

Preschool Program

- Proof of Age Provided
  - Proof of Immunization Provided
  - Registration Fee Received – CASH ONLY
  - Parental Involvement Fee Provided – CASH ONLY
- 3 yr AM 5 hr
  - 4 yr AM 5 hr
  - 4 yr PM 10 hr

Receipt Number: \_\_\_\_\_ Received by \_\_\_\_\_ Date Received \_\_\_\_\_

**NOTE: Withdrawing from the program will require one month's written notice. First month paid is non-refundable.**

**Initials:** \_\_\_\_\_

**STUDENT INFORMATION:**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Birth date: \_\_\_\_\_ Year    Month    Day                      Male \_\_\_\_    Female \_\_\_\_

Age as of September 1, 2017: \_\_\_\_\_

Whom child resides with: \_\_\_\_\_

Language(s) spoken at home: \_\_\_\_\_

**PARENTS OR GUARDIANS:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Email \_\_\_\_\_

Home Address: \_\_\_\_\_ Mailing Address \_\_\_\_\_ Postal Code \_\_\_\_\_  
House / Street Number or Legal Land Description                      If different from home address

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Place of Work: \_\_\_\_\_ Work phone: \_\_\_\_\_

Work Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Email \_\_\_\_\_

Home Address: \_\_\_\_\_ Mailing Address \_\_\_\_\_ Postal Code: \_\_\_\_\_  
House / Street Number or Legal Land Description                      If different from home address

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Place of Work: \_\_\_\_\_ Work phone: \_\_\_\_\_

Work Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_



**SIBLINGS:**

Does/did your child have an older sibling in the school? Yes \_\_\_\_ No \_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

**EMERGENCY CONTACTS (other than parents):**

1. Name: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work or Cell phone: \_\_\_\_\_

Home Address or Legal Land Description: \_\_\_\_\_

Postal Code: \_\_\_\_\_

2. Name: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work or Cell phone: \_\_\_\_\_

Home Address or Legal Land Description: \_\_\_\_\_

Postal Code: \_\_\_\_\_

**MEDICAL INFORMATION:**

Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Alberta Health Care Number: \_\_\_\_\_

**CONSENT FOR EMERGENCY MEDICAL TREATMENT:**

In an emergency, my child may need medical or surgical treatment. If an emergency occurs, every reasonable effort will be made to contact the parent. If you cannot be reached, I give permission for emergency medical treatment of my child. Any expense incurred for emergency medical treatment under this section will be my responsibility.

\_\_\_\_\_  
(Signature of Child's Parent or Guardian)      Year      Month      Day

\_\_\_\_\_  
(Printed Name of Child's Parent or Guardian)



PRESCHOOL HEALTH RECORD:

The Alberta Daycare Regulations require Junior Kindergarten operators to maintain a health record for each child in attendance at their Junior Kindergarten. Some of this information is repeated from Page 2. This is because the health record is filed separately from the Teacher's Information sheet.

CHILD'S INFORMATION:

Last Name: First Name: Middle Name: Birth date: Year Month Day

PARENTS OR GUARDIANS:

Last Name: First Name: Relationship: Place of Work: Home phone: Day phone:

Last Name: First Name: Relationship: Place of Work: Home phone: Day phone:

NUMBER OF SIBLINGS: Brothers: Sisters: older younger

Family Doctor: Phone:

Alberta Health Care Number:

My child's immunizations are up to date per my child's age: Yes No If No, are you planning to have your child immunized or immunization updated? Yes No If No, please complete the Immunization Waiver Form.

Does your child have a medical condition, allergies, emotional or developmental challenges requiring or receiving treatment or supervision? If yes, please explain below. If your child is involved in the PUF or similar program, please include a separate sheet with details on areas of concern and program requirements.

Blank lines for medical condition explanation

Does your child have food sensitivities, food allergies or a special diet? Please explain and meet with the teacher to discuss:

Blank lines for food sensitivities explanation

Is your child on any ongoing medication? If yes, please explain:



## 2017/2018 Junior Kindergarten Program

### COMMUNICABLE DISEASE POLICY:

The following criteria should be used to decide when a child is too ill to attend Junior Kindergarten. Your child should not attend if he/she has any of the following symptoms:

- Diarrhea
- Vomiting
- Cold
- Fever
- Rash
- Pink Eye (Conjunctivitis)
- Ear Infection, Sore Throat, Cough

If a child develops any of the above symptoms while at Junior Kindergarten, you or your emergency contact person will be notified to take the child home.

In the case of a communicable disease (measles, mumps, rubella etc.), or parasitic infestation, those infected may not attend Junior Kindergarten until a clearance from the Doctor or Health Unit is obtained. A child must be on antibiotics for at least 24 hours, and feeling well, to be able to attend Junior Kindergarten.

I, \_\_\_\_\_ have read and understand Pat Hardy's

Junior Kindergarten Communicable Disease Policy.

\_\_\_\_\_  
(Signature of Child's Parent or Guardian)

\_\_\_\_\_  
Year

\_\_\_\_\_  
Month

\_\_\_\_\_  
Day

\_\_\_\_\_  
(Printed Name of Child's Parent or Guardian)

### TOILETING:

Children must be fully toilet trained to participate in the Junior Kindergarten Program

### GETTING TO KNOW YOUR CHILD:

What are your child's special interests?

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Do you have any hopes or concerns about your child's participation in the Junior Kindergarten? If yes, please explain.

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Does your child have any particular fears (e.g. the dark, thunder, etc.)? If yes, please explain.

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### Volunteer Code of Conduct

Volunteers have special place in schools and assist in many ways. This may include interaction with individuals, small groups of students in a range of different activities. To assist schools in providing a safe environment and a positive educational climate, volunteers are asked to comply with the code of conduct that is expected of volunteers when participating in programs and activities in our schools.

As a Volunteer, I will:

- Treat everyone with respect, loyalty, patience, courtesy, dignity and consideration;
- Be flexible in responding to the needs of students;
  - Be prompt, dependable, and agree to telephone the school if I am unable to attend at the scheduled time;
- Be friendly to students, staff and other volunteers;
  - Be appreciative of efforts of the school to educate all children and to provide maximum learning opportunities for each;
- Be supportive of administration and teaching staff;
  - Be willing to discover interests and strengths of each student and is able to generate enthusiasm about each student;
- Recognize the student's need to improve self-image and independent learning habits;
  - Be willing to communicate regularly with the staff, expressing concerns and questions with teacher or supervisor;
  - Keep all students information confidential. Any information that indicates that a student may harm her/himself or another person must be reported to the teacher or school counselor. If the student reports that he/she has been abused, that information must be reported to the teacher or school counselor. This information should not be repeated to friends, relatives, coworkers or other acquaintances;
- Refer all potential disciplinary problems to the classroom teacher or appropriate staff member;
- Obey all laws and regulations, including traffic laws;
- Obey all school policies and regulations:

As a Volunteer, I will NOT:

- Use, possess, or be under the influence of alcohol or illegal drugs at any time while volunteering;
- Pose any health risk to students, staff or other volunteers (i.e. no fevers or other contagious situations);
- Strike, spank, shake or slap students, staff or other volunteers;
- Humiliate, ridicule, threaten, or degrade students, staff or other volunteers;
- Touch a student, staff or other volunteer in a sexual or other inappropriate manner;
- Use profanity in the presence of a student, staff or other volunteer;
- Drive any student without prior approval by the principal in accordance with Northern Gateway Public Schools procedures.

I, \_\_\_\_\_ have read, fully understand and accept the terms and conditions of volunteering as set out in the volunteer Code of Conduct. I agree to abide by Northern Gateway Regional School Division Policies and procedures.

School: \_\_\_\_\_

Volunteer Signature \_\_\_\_\_ Date \_\_\_\_\_



## 2017/2018 Junior Kindergarten Program

### PARENTAL INVOLVEMENT IN THE CLASSROOM:

The Junior Kindergarten license requires a specific number of adults to be present in the classroom during operation: the licensed instructors and one parent volunteer. This means that parents must volunteer eight days minimum as "Parent of the Day" to assist the instructor. By registering your child in the Junior Kindergarten, you are agreeing to be involved in the classroom. We require a refundable \$50.00 fee that will be held on file. In the event you are unable to attend your scheduled volunteer time or make alternate arrangements, the \$50.00 will be used to pay a substitute. If not used the \$50.00 fee will be refunded at the end of the school year.

Initials: \_\_\_\_\_

### RELEASE AUTHORIZATION:

Please indicate authorized person(s) (other than yourself) to whom the child may be released:

a) \_\_\_\_\_ b) \_\_\_\_\_

Person(s) to whom the child is **NOT** to be released:

a) \_\_\_\_\_ b) \_\_\_\_\_

***The above information will be kept in strict confidence and will only be presented to public health officials should they require such information for any reason.***

### JUNIOR KINDERGARTEN DISCIPLINE POLICY:

The goal of the Junior Kindergarten is to teach the children to socialize in a positive manner. Self-control in expressing their emotions is not always a smooth road, but fair and appropriate discipline will help them to this end. Limits will be stated kindly, but firmly, and consequences for misbehavior will be fair, logical and realistic. Children will be kept in the mainstream where possible and any inappropriate behavior will be redirected into more positive alternatives to the situation. Children who are out of control will be removed from the situation and one on one attention will be provided until the child has gained control. The child will then be invited to join the group again.

If, in the opinion of the teacher, a child's behavior in the classroom disrupts the normal operation of the classroom or the children, the teacher will contact the parents and may suggest that a childcare professional assess the child regarding suitability of that child to continue in the program.

Any child disciplinary action will be reasonable in the circumstance. Staff will not deny or threaten to deny any basic necessity and will not use or permit the use of any form of physical restraint, confinement or isolation. Physical and verbal degradation or emotional deprivation will not be tolerated from the instructor, parent helper, or children and will result in dismissal.

I, \_\_\_\_\_, have read and understand Pat Hardy's

Junior Kindergarten discipline policy.

\_\_\_\_\_  
(Signature of Child's Parent or Guardian)

\_\_\_\_\_  
Year

\_\_\_\_\_  
Month

\_\_\_\_\_  
Day

\_\_\_\_\_  
(Printed Name of Child's Parent or Guardian)

### FOIP AND MEDIA CONSENT 2017 -2018

PLEASE READ THIS INFORMATION BEFORE COMPLETING THE REGISTRATION FORM

#### PARENT /GUARDIAN CONSENT IS NOT REQUIRED FOR COLLECTION AND USE OF PERSONAL INFORMATION FOR EDUCATIONAL PROGRAMMING PURPOSES

Northern Gateway Public Schools is collecting personal information about your son or daughter with the registration form. This personal information supports an educational program for your child and ensures a safe school environment for all students and staff.

Some of the ways the school or the division may use personal information are listed below. The Information and Privacy Commissioner's Office states that the division does NOT require written consent from you for situations including but not limited to:

- sharing information with Alberta Education
- using a student's name, related contact information, and telephone numbers to check on a student who is absent
- using a student's name and/or photos/videos in the school calendar, newsletter, yearbook, or other internal publication
  - taking and using individual, class, team, club, or school photos/videos within the school community (e.g. school bulletin boards, newsletter, etc.) for internal school purposes (not for external purposes such as websites or brochures)
- using a student's name on artwork or material to be displayed at the school or other division sites
- using a student's name on lists such as honour roll, scholarship, or other awards within the school or division
- using a student's name and academic information when the school wishes to apply for provincial and federal awards/scholarships on behalf of the student
  - providing student information, including photos, for the issuance of transit/bus transportation passes and for other identification purposes (student phone numbers will be provided to bus drivers for transportation purposes)

#### PARENT/GUARDIAN CONSENT IS NOT REQUIRED FOR PUBLIC EVENTS

Classrooms are not public places, and the school controls who has access to school property and students on school property. When schools invite spectators, family, friends, media, and the general public into the school, the event becomes a public event (e.g. school concert, cultural program, assembly, sporting competition, graduation, etc.). Anyone may take photographs/videos at public events and the school has no control over how these images may be used. The media are expected to proceed responsibly and cooperate with schools that have invited them to participate in school events. Pictures taken by school staff, at public events, may be used for school purposes (however, these photographs may be used for promotion of the school as part of the signed parental consent on the student registration form).

#### PARENTAL /GUARDIAN CONSENT IS REQUIRED FOR POSTING PERSONAL INFORMATION TO EXTERNAL WEBSITES ACCESS BY MEDIA AND INCLUSION IN PROMOTIONAL MATERIALS

Your informed consent is required to use or collect personal information for any purpose other than educational programming and the safety of students and staff. Consent for the use of this personal information (e.g. name, photo, images, artwork, etc.) that is accessible to the general public is signed off on the student registration form. This consent is requested on a yearly basis. (PLEASE NOTE: consent can be revoked at any time by written notification provided to your child's school).

Written consent is required to:

- use a student's name, photo, or video in external publications (e.g. website, social media, promotional brochure, etc.)
  - use class, team, club, or school photos/videos that are taken within the school community on the school website or for promotional purposes (e.g. brochure, division newsletter, etc.)
- use a student's name on artwork/material to be displayed in the community
- allow a student to participate in media interviews

During the year, schools may request that parents sign specific consent forms not covered by the student registration form. If asked to sign a consent form, the form will indicate the following:

- the purpose of collection or use
- the consent is voluntary
- the consent may be revoked at any time
- the person to contact if you wish to revoke consent
- the period of time during which the consent remains valid

This record of consent must be retained for the period of time for which the consent is valid.

Schools may be contacted by the Communications Officer of Northern Gateway Public Schools or external media agencies (newspaper, radio, television) for access to students for quotes, photos, or interviews. These audio, visual, and/or video images may be published or aired in a variety of locations, including television, radio, newspaper, websites, social media, or division publications.



**DIGITAL CITIZENSHIP AND TECHNOLOGY USE:**

As a condition of using Northern Gateway Public Schools network resources, I understand that access to division information resources, including access to internet and cloud-based resources, is a privilege and agree to abide by Administrative Procedure 140 – Digital Citizenship and the regulations identified in the Northern Gateway Digital Citizenship - Technology Use Agreement.

Please initial to indicate that you have read and understood the policies and regulations identified above.

Initials \_\_\_\_\_

**USING AND DISCLOSING PERSONAL INFORMATION:**

Northern Gateway Public Schools recognizes that all procedures for the collection and storing of information by Division staff in the course of affairs and procedures regulating the release of information to other parties must follow provisions of the Freedom of Information and Protection of Privacy Act (FOIP). Access to information is guided by Administrative Procedure 180 - Freedom of Information and Protection of Privacy.

Further details can be found in the FOIP and Media Consent document.

Please initial to indicate that you have read and understood the policies and regulations identified above.

Initials \_\_\_\_\_

**CONSENT TO POST PERSONAL INFORMATION:**

Northern Gateway Public Schools requests consent to post personal information to external websites, social media, media publications, and promotional materials. Information regarding consent to post personal information can be found in the FOIP and Media Consent document. Please check all of the following that you agree to and initial below. Consent can be revoked at any time by written notification provided to your child's school.

Last Name  First Name  Grade  Photograph  Video  Audio  Award Recognition  School Related Activities

Please initial to indicate that you have read and understood the policies and regulations identified above.

Initials \_\_\_\_\_

**MEDIA PARTICIPANT CONSENT**

Information regarding media participation can be found in the FOIP and Media Consent document.

Please initial each of the following that you agree to.

Consent can be revoked at any time by written notification provided to your child's school.

I hereby give Northern Gateway Public Schools permission to photograph, video tape, audio tape, and/or interview my child while he/she is under the supervision of Northern Gateway Public Schools

Initials \_\_\_\_\_

I hereby give Northern Gateway Public Schools permission to use, publish, display, and copyright any work, written material, or creative work created or authored by my child through school activities. I understand that artwork, written material, or creative work may be used by Northern Gateway Public Schools in division or school displays, publications, websites, social media, other electronic media, and advertising or promotional materials. I understand that Northern Gateway Public Schools may make minor edits as deemed appropriate.

Initials \_\_\_\_\_

I hereby give Northern Gateway Public Schools permission to permit outside organizations to photograph, video tape, audio tape, and/or interview my child while he/she is under the supervision of Northern Gateway Public Schools. I understand that this means that a photograph(s), video(s), audio tape(s), interview(s), or likeness of my child may be collected, used, reproduced, and broadcast by the outside organization.

Initials \_\_\_\_\_

Please initial to indicate that you have read and understood the policies and regulations identified above.

Initials \_\_\_\_\_