

ERICO CHILDCARE CONSULTANTS LTD.

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REGISTRATION NOTES 2024-2025

RETURNING CHILDREN

PRE-REGISTRATION DEADLINE 27 JUNE, 2024. After this date we cannot guarantee your space.

- Please read the **Registration Form** carefully and complete it fully. *It is fillable. (No blank areas and nothing handwritten.) It is already a pdf so all you need to do is save a copy for your records and send a copy to us via e-mail. (Do not 'save as') There is no need to physically sign it - just print your name in the signature boxes.*
- Also send a **recent colour portrait photo** (jpeg) of your child. *They should be instantly recognizable in the photo.*
- Download & read the **Policy & Procedures/Parent Information Pkg** on our website then sign where indicated on the last page of the Registration Form, saying you have read & understood it.
- **E-transfer \$50** per child to ericoccc@telus.net for the **Registration Fee** dated the current date (*non-refundable*)

Your registration will not be accepted if the requested information is incomplete.

REGISTRATION & PLACEMENT.

Up until 27 June 2024, returning children will be given the opportunity to re-register for the days that they attended in June 2024. After that date, because of the Licensed Capacity of all our Centres, the following 'pecking order' will be used to determine the order in which the children will be assigned a space at each Centre in September. **PLEASE NOTE:** As space is at a premium all registered days must be paid for and fully utilized for at least 4 months from the start of the school year. Failure to do this will automatically cause a review of your registration and may result in a change in care.

Priority for those families registering for the entire school year will be as follows:

1. Before and after school 5 days per week. (Session 1 & 3)
2. Before and after school 4 days per week. (Session 1 & 3)
3. After school 5 days per week. (Session 3)
4. Before and after school 3 days per week. (Session 1 & 3)
5. After school 4 days per week. (Session 3)
6. After school 3 days per week. (Session 3)
7. Before and after school 2 days per week. (Session 1 & 3)
8. After school 2 days per week. (Session 3)
9. Before and after school 1 day per week. (Session 1 & 3)
10. After school 1 day per week. (Session 3)

FEE PAYMENT: Please note our fees are payable by cheque only. If you do not already have cheques please arrange to get some from your Bank now. (*a fair warning!*) We require 10 postdated cheques, dated the first of each month, to be given to us on the first day that your child attends School in September. Failure to do this will mean they will not be able to start with us until the cheques have been received.

Regrettably we are not able to participate in the Childcare Fee Reduction Initiative this year, however financial assistance may be obtained through the Affordable Childcare Benefit program.

ERICO CHILDCARE CONSULTANTS LTD REGISTRATION FORM SCHOOL YEAR 2024 - 2025

All fields must be completed

Child's Information

First Name: _____ Last Name: _____
Male/Female: _____
Date of Birth (dd/mm/yyyy): _____
School: _____ Grade: _____

Mother's Information

First Name: _____ Last Name: _____
Address: _____
City: _____ Post Code: _____
Cell: _____ Wk Tel: _____ Home: _____
e-mail: _____

Father's Information

First Name: _____ Last Name: _____
Address: _____
City: _____ Post Code: _____
Cell: _____ Tel Wk: _____ Home: _____
e-mail: _____

If divorced or separated

Custody: _____ Court Documents: _____ Y/N

Emergency Contact Information

We require that you designate and authorise two people, not living at the same address but living/working on the North Shore, & preferably in the same area as you, who can be contacted in the event that you cannot be reached, or to pick up your child should you be unable to do so. They must show some form of I.D. when they come to collect your child. These people cannot be yourself, your husband/wife or partner.

Emerg #1 First Name: _____ Last Name: _____
Address: _____
City: _____
Cell: _____ Tel Wk: _____ Home: _____

Emerg #2 First Name: _____ Last Name: _____
Address: _____
City: _____
Cell: _____ Tel Wk: _____ Home: _____

Name of any person NOT allowed to collect your child: _____

Medical/Health Information

Doctor's First name: _____ Last Name: _____
Tel: _____
Child's MSP #: _____

Medical/Health Information

Please indicate any special concerns, allergies, medications or chronic conditions your child may have:

For life threatening conditions a Care or Emergency Plan must be in place.

Immunization

My child has been immunized against DPT, MMR., Polio, Hib and all are up to date & on file _____ Y/N

I have chosen not to have my child immunized. *(An official document needs to be completed and kept on file.)* _____ Y/N

EMERGENCY DISASTER PLAN - Mandatory

I hereby designate the following people to collect my child in the case of an emergency should I be unable to do so

First Name: _____ **Last Name:** _____ **Cell:** _____

First Name: _____ **Last Name:** _____ **Cell:** _____

Out of Province Contact - *this person can live anywhere in the world except B.C. Include Country Code & Area Code*

First Name: _____ **Last Name:** _____

Tel: _____ **Country/Prov:** _____

EMERGENCY CONSENT

It is a requirement of the Community Care and Assisted Living Act, Child Care Licensing Regulations, that the Licensee obtain an Emergency Consent Form signed by a parent or legal Guardian of each child enrolled in the licensed facility.

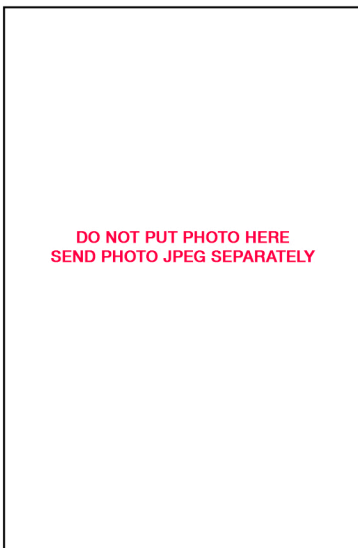
I hereby give permission to *Erico Childcare Staff* to call a physician, ambulance or transport my child

First Name: _____ **Last Name:** _____

to the nearest Medical Centre in the case of accident or illness when I cannot be reached.

Parent or Guardian: *(print name)*

Date: _____



DAYS REQUIRED FOR SCHOOL YEAR 2024 -2025

**ALL CHILDREN MUST BE OF SCHOOL AGE - Kindergarten to Grade 7
but priority will be given to those entering grades K-6**

I will require care for my child

First Name: _____ **Last Name:** _____ as follows

(Mark 'Yes' for days required)

Session 1	Session 3
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Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

1. There are two sessions throughout the day in which you can register your child:
Session 1: 7.30am - 9.00am before School & Session 3: 3.00pm – 6:00pm after School
2. You may register for one or two sessions per day.
3. You must register for a minimum of three days per week (*otherwise the 1 - 2 Day rate will apply.*)
4. Flexible care may be arranged depending on enrollment.
5. **FEES** are payable monthly by 10 post-dated cheques, dated the 1st of each month for the School Year.
Cheques should be made payable to Camp Ridgeview, Holly House or Erico Childcare Consultants Ltd
6. Please write your child's name on each cheque
7. **Please note that these cheques must be received by Friday 6 September 2024 at the latest.**
Failure to do this will result in us not being able to look after your child the second week onwards, until we get them.

A **\$50 Registration Fee** (*non-refundable*) is required for **ALL registrations** (*new & returning*) to secure your space.

It is payable by E-TRANSFER to ericoccc@telus.net

Paid: _____

NOTE

Please take time to read our **POLICIES & PROCEEDURES** document pertaining to the School Year 2024 -2025
Important information is contained therein, and it changes each year then sign the declaration below

***I have read and understood the POLICIES & PROCEEDURES pertaining to Camp Ridgeview, Holly House,
La Maison & Club West contained in the Parent Information Package for the School Year 2024 -2025***

Parent or Guardian: (*print name*)

Date: _____