



## Registration Package

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*(Child's Name)*

### OFFICE USE:

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_

Application Updates: \_\_\_\_\_

\_\_\_\_\_

Allergies/Dietary Restrictions: \_\_\_\_\_

Assessments: \_\_\_\_\_



Email Address: [growingmindselc2026@gmail.com](mailto:growingmindselc2026@gmail.com)  
Address: #11152 – 84 Avenue NW Edmonton, AB T6G 0V8  
Phone #: 825-480-2957

Dear Parent(s),

**Welcome to Growing Minds Early Learning Centre!**

Please fill out the forms as accurately as possible, as we use them to ease the transition of your child from home to the centre. We look forward to embarking on your child's story together and making it as great as possible. If you ever have any questions, concerns, or ideas to improve the program, please do not hesitate to speak with us. We are a very open centre and thrive on communication between operators, staff, children, and parents.

*Thank you,  
Growing  
Minds  
Early  
Learning  
Centre  
Staff*



## Child Information:

Child's Name: \_\_\_\_\_

Gender: \_\_\_\_\_

Date of Birth: Year: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_

Home Address: \_\_\_\_\_

Child's Home #: \_\_\_\_\_ Mobile #: \_\_\_\_\_

Parent's Email Address: \_\_\_\_\_

## Parent Information:

Mother's Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_

Home Phone #: \_\_\_\_\_

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

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

Occupation: \_\_\_\_\_

Occupation: \_\_\_\_\_

Work Address: \_\_\_\_\_

Work Address: \_\_\_\_\_

Work Phone #: \_\_\_\_\_

Work Phone #: \_\_\_\_\_

Mobile #: \_\_\_\_\_

Mobile #: \_\_\_\_\_

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

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

## Family Information:

Marital Status: \_\_\_\_\_

Siblings and their ages: 1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

4) \_\_\_\_\_

Parents with custody of the child please list any agreements (Please provide copies of any orders/agreements) : \_\_\_\_\_



## Emergency Contact Information:

1. Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_  
Phone #: (H): \_\_\_\_\_ (W): \_\_\_\_\_ (C): \_\_\_\_\_  
Address: \_\_\_\_\_
2. Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_  
Phone #: (H): \_\_\_\_\_ (W): \_\_\_\_\_ (C): \_\_\_\_\_  
Address: \_\_\_\_\_

## Authorized people to whom the child may be released to:

1. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship to the Child: \_\_\_\_\_
2. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship to the Child: \_\_\_\_\_
3. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Relationship to the Child: \_\_\_\_\_

## My child must not be released to following persons:

1. \_\_\_\_\_
2. \_\_\_\_\_



## Child's Personality

*Please answer the following questions to help us understand your child's needs and interests.*

1. Favorite Activities: \_\_\_\_\_
2. Fears: \_\_\_\_\_
3. Dislikes: \_\_\_\_\_
4. Reaction to Stress: \_\_\_\_\_
5. Previous Daycare/Day Home (if any): \_\_\_\_\_

What was your child's previous experience with daycare like?

\_\_\_\_\_

6. Physical Goal: \_\_\_\_\_
7. Personal Goal: \_\_\_\_\_
8. Pets: \_\_\_\_\_
9. Let us know what you expect from our center:

\_\_\_\_\_

10. Eating habits and food preferences/restrictions:

\_\_\_\_\_

\_\_\_\_\_

11. What is your family's ethnic, cultural, religious background?

\_\_\_\_\_

12. What languages are spoken in your household?

\_\_\_\_\_

13. What holidays and traditions are celebrated in your household? How do you celebrate them?

\_\_\_\_\_

\_\_\_\_\_



14. Why are these holidays and traditions important to you and how do they represent your family? \_\_\_\_\_  
\_\_\_\_\_

15. What kind of experiences has your child had in celebrating holidays?  
\_\_\_\_\_

16. What would you like to see in your child's program during the holiday seasons and special days such as Christmas, Halloween, Mother's Day, Easter, etc.?  
\_\_\_\_\_

17. What kind of songs, languages, food, books, art materials and toys could we add to our program to represent and support your family?  
\_\_\_\_\_

18. Are you willing to come into the daycare center and share your traditions/celebrations with the staff and/or children?  
\_\_\_\_\_

19. Describe your child's day:  
\_\_\_\_\_

20. Self – care skills:  
\_\_\_\_\_  
\_\_\_\_\_

21. Normal method of discipline: \_\_\_\_\_

22. Child's temperament (circle one): Easy going – Hard to please – Demanding – Aggressive –  
Other: \_\_\_\_\_



## Medical Information:

Alberta Health Care #: \_\_\_\_\_

Name of Physician: \_\_\_\_\_ Phone #: \_\_\_\_\_

Immunization up to date: (Yes) (No) Date of last Immunization: \_\_\_\_\_

Any allergies, regular medication, chronic conditions, etc.:

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Has your child had any medical or emotional conditions requiring/receiving treatment?

( ) Yes ( ) No

If Yes, \_\_\_\_\_

Is your child on daily medication? ( ) Yes ( ) No

If yes, please give name of medication and directions for use:

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**A \$50.00 non-refundable registration fee is required payable prior to commencement. This insures your child's place at the centre.**

- **If we are holding the spot for more than 1 month, a larger deposit will be requested which is non-refundable.**
- **Payment forms accepted for monthly payments are interac e transer, post-date cheques and cash. Make cheques payable to 1568626 ALBERTA LTD.**

I have read and understood the above admission policies and hereby certify that the information in this registration form is true, correct and complete in every respect.

\_\_\_\_\_  
*Printed Name*

\_\_\_\_\_  
*Parent Signature*

\_\_\_\_\_  
*Date*



|  |
|--|
| Child's Name: _____  |
| DOB (dd/mm/yyyy): _____                                      |
| Address: _____   |
| Alberta Health Care Number: _____                            |
| Allergies: _____   |
| Medical Instructions: _____                                  |
| Are all immunizations up to date?    (    ) Yes    (    ) No |
| Emergency Contact Name: _____                                |
| Contact's Address: _____                                     |
| Contact's phone number: _____                                |
| Father's Name: _____   |
| Address: _____   |
| Phone Number: _____  |
| Mother's Name: _____   |
| Address: _____   |
| Phone Number: _____  |

**Please fill out the following emergency contact card**



## Sunscreen and Bug Spray Permission Form

During the warmer weather/summer seasons when UV becomes evident, before going outside the staff will apply sunscreen to protect their skin from the sun with your consent.

Also, depending on the year/season mosquitoes can stop the enjoyment of outdoor play. The staff may apply mosquito/bug spray to your child with your consent.

Parents are responsible for providing sunscreen and bug spray for their child(ren) Please label any bottles with your child(ren)'s name(s).

I acknowledge that I have read the above information about Sunscreen and Bug Spray and hereby give permission to the staff of Early Learning Centre to apply sunscreen and bug spray to my child and that I have provided the sunscreen and bug spray.

Child Name: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_



## Parent/Admissions Agreement

### 1. **Payment Due Dates & Late Fees**

Fees are due within the first five (5) business days of each month and must be paid on time to avoid late charges. A late fee of **\$5.00 per day** will be applied for each day payment is overdue. Notices of late payment will be issued on the **10th business day** of the month. A fee of **\$40.00** will be charged for all **N.S.F. (non-sufficient funds) cheques**. Repeated instances of N.S.F. payments may result in cheques no longer being accepted as a form of payment. 6 post-dated checks will be provided prior to start for advanced monthly payment. They will not be cashed until the noted date.

2. The center closes at 5:45 p.m. Parents are expected to pick their children up before that time. Late pick-up due to unusual circumstances (e.g. car accident, excessive snowstorm, or vehicle breakdowns) is okay. However, a phone call to the center is required whenever possible. There will be a charge of \$1.00 per minute starting at 6:00 p.m. If a parent/guardian has not arrived or contacted the daycare by 6:30 p.m. we will contact one of the emergency contact people for them to pick up your child (this is if you fail to contact us about your delay). If after 7:00 p.m. no one has been contacted, social services will be called.
3. We require a \$50.00 non-refundable deposit if you would like a space held for your child. This fee must be paid during the registration process. Spaces are not saved for children who are leaving the center during the summer months or for extended periods of time during the year. Children's names may be placed on the waiting list for re-entry into the program. A \$50.00 non-refundable deposit is required again if reapplying. **Please note that this deposit is non-refundable. If your child does not end up attending the day care, the deposit is forfeit.**
4. If the parent/guardian is unable to pick up their child, they are required to arrange for another to do so. For the child's safety, we require the parent/guardian to fill out a departure form which will give written permission to the alternate to pick up their child. At the time of departure, the person will be asked to show some photo ID.
5. We ask that you send your children in comfortable clothing and footwear. Please send a spare set of clothing to be stored in your child's shelf. Please dress your child appropriately for the weather (e.g. raincoats, snowsuits, sun hats etc.) as the children are taken out every day weather permitting. Please provide soft-soled footwear (e.g. runners) for your child. We try our best to keep track of your child's belongings. **Please help us by labeling them.**
6. If your child is taking holidays or is absent from the center for some time during the month you are required to pay for your child's full monthly fee. If your child is going to be away for a full month you are still required to pay for your child's full monthly fee to hold their spot. Fees are not reduced for statutory holidays.
7. The daycare is closed on New Year's Day, Family Day, Good Friday, Easter Monday, Victoria Day, Canada Day, Heritage Day, Labor Day, Thanksgiving Day, Remembrance Day, Christmas Day, Boxing Day.
8. Parents on subsidy are responsible to make sure their subsidy is always valid. If in any case that your child's subsidy is expired, you are responsible for full fees for the month until your subsidy has been renewed. If you have been granted backdated subsidy to the expiry date and have been paying full fees for the month, you will be given a credit for the amounts that you have paid over and above for the non – subsidized portion of your fees, which be applied for the following months. Please send in your renewal and all requiring documents for subsidy one month before the expiry date to avoid disappointment.



9. Fees are quoted at the time of registration. Should fees be increased all parents are notified 30 days in advance.
10. Staff will administer first aid, and if required obtain medical assistance, for any child in their care when required/necessary. It is the parents' responsibility for costs of any medical assistance/expenses.

If a child requires medical assistance the following will be done:

- a) Parents will be contacted, if parents are unavailable, an emergency contact will be contacted.
  - b) If required, the child will be transported to the nearest hospital in an ambulance in the event of an emergency. Cost of ambulance will be the parents' responsibility.
11. Children will be out of the center at any given time for either of the following reasons:
    - a. May be on walks in the neighborhood, and to parks in the area
    - b. May be on field trips (prior written consent for each trip/event will be obtained beforehand)
  12. The daycare staff will not permit your child to leave the center with anyone other than the individuals listed as authorized persons and emergency contacts. Exceptions will only be made when the parents have notified the Director and/or staff. If the said individual is picking up your child and is not known to the staff, they will be required to produce photo identification at the time of pick up.

*Please note: in case of a separated (formally or informally), or divorced situation, we cannot prevent either parent from taking the child unless there is a legal custody agreement or a restraining order on file at the center. In a situation like this, the parent must provide a copy of the court order to the center to keep in the child's file.*

13. The center agrees to use all care and diligence in the caring of children and their personal belongings, but is not responsible for any loss or damage to clothing or other effects of the children, and as well for any accidents, sickness or diseases, that may have occurred to a child while in the care of the daycare center, but with the exception of those resulting from gross negligence.
14. A ONE MONTH WRITTEN NOTICE IS REQUIRED WHEN YOU WITHDRAW YOUR CHILD(REN) FROM THE CENTER. FAILURE TO PROVIDE THIS WRITTEN NOTICE WILL RESULT IN OWNING FEES FOR THAT MONTH.
15. **Parents are required to pick up their child from the center if the child is ill unless there has been a written note provided from a doctor which indicates the child is not pose a health risk to other persons on the daycare premises. Please note the center has a very strict sick policy to better the health of all staff and children.**
16. **I grant permission for photos of my child to be taken and to be used for facility purposes and display on bulletin boards or on daycare website.**
17. **The Centre reserves the right to terminate immediately the enrollment agreement and application of my child who has caused the disruption of the progress of the program.**

I have read and understood the above admission policies.

Name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_



# Key Fob Agreement

The center aims to achieve reasonable security with the use of a key-fob system. Please follow the guidelines of the key fob agreement in order to help maintain security for all children, staff and families associated with the center.

There is a \$50.00 deposit required per key fob requested \$35.00 admin fee and \$15 refundable deposit. All family members who regularly pick up children at our center are required to have a key fob to enter the building. Additional key fobs may be requested for those on authorized pick-up lists.

Key fobs can be used to enter the building's front entrance as well as the back entrance. The hours of entry will be 6:30 AM to 5:45 PM. Visitors outside of these hours or those without key fobs will be required to call in to gain access. Please do not share key fobs with those not on the authorized pick-up lists.

We reserve the right to revoke anyone's privilege to hold a key fob for any reason and at any time. The signor is responsible for all rented key fobs. Please report any lost or stolen key fobs to the center operators immediately. There is a \$50.00 replacement fee for any lost or stolen key fobs. Returning key fobs to the center operators, in good condition, will result in refunds of your initial deposit.

I, \_\_\_\_\_ (name), have read, understood and agree to adhere to the Key Fob Agreement.

Child's Name: \_\_\_\_\_ Number of key fobs requested: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For office use**

|                    |             |                |                 |
|--------------------|-------------|----------------|-----------------|
| Key fob 1 #: _____ | Date: _____ | Deposit (\$50  | received: _____ |
| Key fob 2 #: _____ | Date: _____ | Deposit (\$50  | received: _____ |
| Key fob 3 #: _____ | Date: _____ | Deposit (\$50) | received: _____ |
| Key fob 4 #: _____ | Date: _____ | Deposit (\$50) | received: _____ |

- 1) Replacement key fobs: \_\_\_\_\_ Date: \_\_\_\_\_ Fee received: \_\_\_\_\_
- 2) Replacement key fobs: \_\_\_\_\_ Date: \_\_\_\_\_ Fee received: \_\_\_\_\_
- 3) Replacement key fobs: \_\_\_\_\_ Date: \_\_\_\_\_ Fee received: \_\_\_\_\_



## List of Holidays for 2026 (Daycare Centre Closed)

|  |                                     |
|--|-------------------------------------|
| <b>Family Day</b>                                | <b>February 16</b>                  |
| <b>Good Friday</b>                               | <b>April 3rd</b>                    |
| <b>Easter Monday</b>                             | <b>April 6th</b>                    |
| <b>Victoria Day</b>                              | <b>May 18th</b>                     |
| <b>Canada Day</b>                                | <b>July 1<sup>st</sup></b>          |
| <b>Heritage Day</b>                              | <b>August 3rd</b>                   |
| <b>Labour Day</b>                                | <b>September 7th</b>                |
| <b>National Day for Truth and Reconciliation</b> | <b>September 30<sup>th</sup></b>    |
| <b>Thanksgiving Day</b>                          | <b>October 12<sup>th</sup></b>      |
| <b>Remembrance Day</b>                           | <b>November 12<sup>th</sup></b>     |
| <b>New Year's Day</b>                            | <b>January 1<sup>st</sup>, 2027</b> |

### **Tentative Schedule – Christmas Break**

**December 24<sup>th</sup>, 2026, to January 1st, 2027**

**Centre will re-open on January 4<sup>th</sup>, 2027**