



MANNING REGIONAL CHILD CARE ASSOCIATION

EARLY LEARNING & CHILD CARE CENTER

Phone: 780-836-2588 Cell: 780-836-0213

CHILD APPLICATION FORM

YEAR

Name of Child

Birthdate

Gender ☐

Male ☐

Female ☐

Which days will your child be attending day care?

☐

Full time (Over 100 hours)

☐

Preschool Program

Preschool program (2.5 hours), half day only: Must be potty trained - 3 yrs

My child will be attending ☐

Mon, Wed, Fri (4 yr old's) PM ☐

Mon, Wed, Fri (3 yr old's) AM ☐

I am aware that I will be assigned a supervision day three times a year ☐

Yes ☐

I am aware that I will be required to supply my child with one snack for the day ☐

Yes ☐

I am aware that I will be assigned to supply a party snack item

for one of the Special Event days ☐

Yes ☐

I am aware that I will be expected to participate in the Cash Calendar fundraiser, with

profits going towards supplies and resources for the programs ☐

Yes ☐

Full Time Day Care

I am aware that I will be required to supply my child with two snacks, following the Canada Food

Guide, for the day if they are attending full time Day Care ☐

Yes ☐

Optional nutrition program supply of one hot lunch per day for a cost of \$100/month ☐

Yes ☐

No ☐

Optional Enrichment Initiative for a cost of \$10/month ☐

Yes ☐

No ☐

Required Start Date

Drop-off Time

Pick-up Time

MOTHER

Name

Physical Address

Mailing Address

Postal Code

Home Phone #

Cellphone #

Child's Residence ☐ Yes ☐ No

Employer

Physical Address

Work Schedule

Business Phone #

Email

FATHER

Name

Physical Address

Mailing Address

Postal Code

Home Phone #

Cellphone #

Child's Residence ☐ Yes ☐ No

Employer

Physical Address

Work Schedule

Business Phone #

Email

LOCAL EMERGENCY CONTACTS (OTHER THAN PARENTS)

Name

Phone #

Physical Address

Relation to child

Name

Phone #

Physical Address

Relation to child

Persons other than yourself that are allowed to pick up your child/children:

Name

Relationship to child

Persons not allowed access to your child/children:

Name

Relationship to child

Help us to get to know your child. What are his/her favorite things and activities? Does he/she have any special interests?

Cultural heritage

Languages spoken at home

HEALTH INFORMATION

ALLERGIES:

Foods

Drugs

Smoke

Pets

Other

Does your child have a chronic medical condition? ☐ Yes ☐ No

Please specify:

Does your child take regular medication? ☐ Yes ☐ No

Please specify:

Are your child's immunizations up to date? ☐ Yes ☐ No (*Note: a copy may be required for child's file)

Alberta Health Care Number:

Doctor's Name: Phone #

CHILD PROFILE

Eating Habits:

Does your child use: ☐ Bottle ☐ Cup ☐ Spoon

Food likes:

Dislikes:

Eating Schedule:

Sleeping Habits: For children under 3 years old

Morning nap time: Afternoon nap time:

Preferred sleeping equipment: ☐ Bed ☐ Mat ☐ Other:

Self Help Skills:

☐ Feeds self ☐ Washes self ☐ Brushes own teeth ☐ Dresses self

Toileting:

Is your child toilet trained? ☐ Yes ☐ No ☐ Working on it ☐ Has accidents

Does he/she use: ☐ A potty chair ☐ Toilet seat ☐ Toilet

Diapers: ☐ Disposable ☐ Training pants

Play Habits:

What is your child's favorite toy?

What activities does your child enjoy the most?

Does your child enjoy book/hearing stories?

Does your child enjoy music?

Child's other interests?

Does your child have any fears that we should be aware of?

How do you know when your child is not feeling well?

How does your child react to new people and new situations?

Other comments: (Please note anything else that may affect the care of your child)

Has your child previously attended Day Home or Day Care?

☐

Yes

☐

No

If yes, where?

TIMES:**Full Time Day Care:**

Monday to Friday - 7:30 a.m. - 5:30 p.m.

Open twelve months of the year except for stat holidays, Christmas, Spring breaks and Professional Development Days as outlined in the yearly calendar.

Manning Early Learning & Child Care Center

Full Time(100-180 hours)

Ages	DayCare Rates	Affordability Grant	Parent Fee	Nutrition Program	Enrichment Initiative	Total Parent Fees
12 months - less than 19 months	\$1,405.56	\$1,079.31	\$326.25	\$100.00	\$10.00	\$436.25
19 months - less than 3 years	\$1,249.50	\$923.25	\$326.25	\$100.00	\$10.00	\$436.25
3 years - less than 4 years	\$1,211.76	\$885.51	\$326.25	\$100.00	\$10.00	\$436.25
4 years - 5 years	\$1,204.62	\$886.53	\$326.25	\$100.00	\$10.00	\$436.25

Preschool Fees

Time	DayCare Rates	Preschool Fee	Government Grant	Total Parent Fee
Over 100 hours	\$436.25	\$60.00		\$496.25
3 days a week x 2.5 hours		\$300.00	\$100.00	\$200.00

* Parents will be required to fill out a Registration Parent Confirmed Hour Sheet at the time of registration. Parents will be invoiced on the 15th of each month, for the month's fees, according to their Registration Confirmed Hour Sheet.

* Minimum hours booked: 1 day=8-9 hours

* Prepayment of fees is required. Payment for the next month must be handed in by the 25th of the present month. Payment may be made by cheque, cash or by e-transfer to: thelearningtree02@gmail.com

* There will be no refunds for cancellation, except in the event of the extenuating circumstances. Examples of extenuating circumstances may include job loss, death in the family, etc. Those wishing to apply for a refund must submit a written request to the MRCCA Board for review.

***Parents: Please be advised that space is limited to 60 full-time spaces. Once you have committed to a schedule there may not be space available to increase your schedule later on.**

Fees: Children MUST be picked up no later than 5:30 pm. Late charges of \$5.00 per fifteen minutes, or portion thereof, will be charged by the Agency.

Payment is payable to the Early Learning & Child Care Centre and is collected by the Receptionist. A receipt will be issued at the end of each year or upon request.

Parents will be required to pre-pay for their monthly childcare space.

Full time children will be given priority. Please refer to Priority List.

Invoice will be sent around the 15th of each month

Payment for the next month must be handed in by the **25th** of the present month. Payment may be made by cash, cheque or by E-transfer to thelearningtree02@gmail.com. Parents may hand in post dated cheques also. Additional \$3 fee will be applied if parents pay through Procare app via debit or credit card.

If Parents exceed their paid timeslot without notification to staff, an additional \$5/15 minutes will apply, to be paid upon picking up the child.

There will be no refunds for cancellation, except in the event of extenuating circumstances. Examples of extenuating circumstances may include job loss, death in the family, etc. Those wishing to apply for a refund must submit a written request to the MRCCA Board for review.

Should there be a need to cancel; staff must be notified in order to maintain child/staff ratios. Parents will be required to fill out a monthly attendance form to confirm days and times children will be in attendance.

*Note - It is a requirement of the Program that the Parent sign their child/children in and out on the ProCare program.

I have been given, have read and understood the Parent Handbook, which outlines policies and procedures that affect my child and me. _____ (Parent's Initials)

I am aware of the Early Learning & Child Care fee schedule and the policies regarding collection of fees. I understand that the Parent fees are due upon booking the space and are non-refundable. _____ (Parent's Initials)

Parent / Guardian Signature:

(Placing your initials here
will serve as your signature)

Date:

Manning Early Learning & Child Care

The Learning Tree Waitlist Policy

Who can apply?

To be on The Learning Tree waiting list, a parent or legal guardian must complete an application form and provide all required information accurately. A child will be placed on Learning Tree's waiting list once documentation is complete.

The Learning Tree will accept full time spots only (over 100 hours or 3-5 days per week)

A child can be placed on The Learning Tree's waiting list if the child has not yet been born.

Placement on the list?

The order in which children are placed The Learning Tree's waiting list is based on the following factors:

1. Date on which the electronic or hand delivered application is submitted and completed accurately, in its entirety
2. The requested month childcare would start
3. The age group a child would be when they would start at The Learning Tree.
4. Whether the application is for a single child or siblings

Parents should register for as early a start date as they would be willing to start at The Learning Tree, i.e., if registered for care to start in February, a family would not be called if a January space becomes available unless all families on the January list decline the space.

If parents defer a space or move the start date to another month, their space on the waiting list will be dependent on the date on which they originally registered for that child to be on The Learning Tree waiting list.

If a space is not available for the month a parent would like to start care, The Learning Tree will automatically move that application to the next month's waiting list. The priority in the next month's waiting list will be based on the date of the original application.

Priority

The Learning Tree gives priority to different groups which effectively moves them up the waiting list. The different tiers of The Learning Tree's waiting list are:

1. Staff of Learning Tree: The Learning Tree reserves the right to give priority to Learning Tree Staff members.
2. Siblings: siblings of current Learning Tree clients receive priority placement on The Learning Tree's waiting list.
3. Priority to full time children

Maintaining the waiting list

The Learning Tree communicates with its waiting list regularly, primarily through email. From time-to-time there may be a call to action in an email requiring the recipient to alert The Learning Tree if they wish to remain on the waiting list. If we do not receive a response within fourteen days of requesting this information, the child may be removed from The Learning Tree's waiting list.

If the parent contacts The Learning Tree after this time period and states that they wish to remain on the waiting list, the application date will be changed to the date that The Learning Tree received this confirmation.

The purpose of this policy is to ensure that The Learning Tree's waiting list is always as accurate as possible so that parents who no longer wish to be on the list can be removed thereby giving parents a more accurate idea of their likelihood of securing a space.

Requests for information

Parents can contact The Learning Tree Site Supervisor, to ask about their child's place on the waiting list. Within 24 hours (or the next business day), the Site Supervisor will let the parent know what number they are on the list for the month they are looking for care.

At this time, the Site Supervisor will let the parent know that this number may change depending on families withdrawing from the waiting list, other members of the waiting list changing their requested start dates, or if priority individuals join the waiting list.

Offering of spaces

Spaces become available when a child graduates from The Learning Tree or when a family terminates care. Parents are required to give one month's notice, prior to the last working day of the month.

Therefore, it is expected that the minimum amount of notice a family will receive about an available space will be 1 month. We endeavour to give parents as much notice as possible if we are aware of upcoming spaces.

Parents of preschool children that are eligible to go to kindergarten in September are required to inform The Learning Tree by last working day in April when their child will be leaving the program.

For waiting list families looking for care between July-September, spaces will begin to be offered mid-May as we can start planning for departures at this time.



Freedom of information and Protection of Privacy, Interview/Photograph/Video Consent and Information Collection Form

Early Learning & Child Care collects, uses, and maintains personal information solely for the purpose of delivering high-quality childcare services. All information collected is protected under the Alberta Freedom of Information and protection of Privacy Act (FOIPP) and the Personal Information Protection Act (PIPA)

is participating in Day Care and Preschool activities during the school year
(Name of Child)

As part of our regular program operations, we collect and record information such as developmental progress, health details, and family contact information. This information is essential for the provision of appropriate care, program planning, communication, and ensuring the health and safety of your child.

There may be occasions when the local media (e.g. newspaper) will be present at our activities to take photographs or videos. Consent for use of this information, including visual media, is voluntary and helps us highlight program activities and children's achievements.

We may also use children's photos on our private Day Care Facebook page to share updates with parents.

Consent options (Please check all that apply):

- ☐ I consent to the collection, use, and storage of personal information by the Early Learning & Child Care Program for the purposes of care provision, program planning, and communication.
- ☐ I do not consent to the collection of additional personal information beyond that which is strictly necessary for enrolment.
- ☐ I give permission for media to take photographs or videos of my child for reporting on day care activities.
- ☐ I do not give my permission for media to take photographs or videos of my child.
- ☐ I give permission for photos of my child to be placed on the Day Care Facebook Page.
- ☐ I do not give permission for photos of my child to be placed on the Day Care Facebook Page.

(Placing your initials here
will serve as your signature)

Signature of Parent or Guardian

Name of Parent or Guardian

Date



**MANNING REGIONAL CHILD CARE ASSOCIATION
EARLY LEARNING & CHILD CARE CENTRE**

Emergency Medical Waiver

I, authorize staff to give first aid and/or arrange for emergency medical care (transportation and ambulance) for my child in the event that I cannot be contacted immediately. I further consent to pay for all medical expenses deemed necessary in cases of emergency.

Signature of Parent or Guardian

(Placing your initials here
will serve as your signature)

Date

Chronic Medical Condition

It has been disclosed to the Early Learning and Child Care Program that

(Child's Name)

has and it is agreed that the staff will be required to administer

(Condition)

(Medication)

☐ On a daily basis

☐ When required

The Staff has received instructions and/or a demonstration of the required care and is able to carry out the procedure. The Parent will keep the Staff updated on any changes of the child's condition or medication and will advise the office of any significant changes to either.

Comments:

Signature of Parent or Guardian

(Placing your initials here
will serve as your signature)

Date

Casual Field Trip Consent

I, give my permission for
(Parent's Name) (Child's Name)

to participate in routine activities such as walks in the neighborhood, walking to and from school or visits to nearby community playgrounds or facilities:

1. Manning Library
2. Lions Park
3. Rosary School
4. Manning Elementary School
5. Millenium Playground
6. Walks Around Downtown Area
7. Manning mini Gym
8. Skate Park

*If the children will be going to one of the above noted locations, you will be notified on Procure.

Signature of Parent or Guardian

(Placing your initials here
will serve as your signature)

Date

Permission to Apply External Preparations

I, authorize the Early Learning & Child Care Staff to apply for my
(Parent's Name)

child, one or more of the following external preparations, in accordance with the directions for use on the container:

- Band-aids
- Antibiotic ointment (Polysporin, Neosporin, etc)
- Insect Repellant
- Sunscreen
- Non-prescription ointment (Vaseline, Lotion, etc)
- Other: Please specify

*I understand that it is my responsibility to supply the preparations.

Signature of Parent or Guardian

(Placing your initials here
will serve as your signature)

Date

Ages and Stages Questionnaires (ASQ) & Sharing of Information Consent

I understand and consent that the staff of Early Learning & Child Care program may use developmental screening tools (Ages & Stages Questionnaires) to assess the overall development of my child.

I consent to the sharing of child-specific information that will benefit my child, with outside agencies ie, schools, Health Nurse and applicable community organizations.

I understand that ASQ & ASQ-SE are mandatory for registration confirmation.

I understand that after I have handed in my registration forms the ASQ & ASQ-SE forms will be emailed to me to finalize my registration.

Signature of Parent or Guardian

(Placing your initials here
will serve as your signature)

Date

Mandatory Document Check List

☐ Registration and Consent Forms

☐ ASQ

☐ ASQ - SE

☐ I am interested in knowing more about sponsorship