



Mission Association for Community Living

"Building Bridges Together"



Sandcastle Preschool

"Where learning is child's play"

33345 Second Avenue, Mission, BC V2V 1K4

Telephone: (604) 826-0622

Email: sandcastle@macl.bc.ca

OFFICE USE ONLY

Registration Fee Paid

1st month Tuition Chq Rec'd

Registration Date: _____

Class Color: _____

Start Date: _____

End Date: _____

Center Visit Appt.: _____

Target Teacher: _____

SCD Y / N

REGISTRATION FORM

Please fill out **both sides completely** and sign and date the back.

Child's Name: _____ Date of birth: _____
Month / Day / Year

Male: _____ Female: _____ Nationality _____ Language(s) spoken: _____

Are there any cultural, ethnic or religious practices that are important to consider when working with your child and family? _____

Home Address: _____ Home Telephone: () _____
Postal Code: _____

Email Address: _____

Name of Mother: _____ Occupation: _____

Cell Phone # _____ Work Telephone: (604) _____

Name of Father: _____ Occupation: _____

Cell Phone # _____ Work Telephone: (604) _____

Marital Status of Parents: _____ Custody/visitation arrangements: _____

If yes, please specify _____

List sibling(s) and their ages:

Is your child toilet trained? _____ Describe assistance needed and words used _____

Does your child have any particular toy or object he/she is attached to or uses for comfort or security? _____

What are your child's favourite activities? _____

Has your child attended preschool or daycare before? _____

Please describe his/her previous experiences _____

Does your child have any medical conditions? (i.e. asthma, epilepsy, allergies) _____

Does your child have any extra needs that would require extra support? (i.e. behavioural concerns, communication difficulties, developmental delays) _____

What do you hope will be included in your child's preschool program? _____

How did you hear about Sandcastle Preschool? _____

Please indicate which class you would prefer your child to attend. (Check one only)

- | | | | |
|--------------------------|--------------------------------|---------------------------|------------------------------------|
| <input type="checkbox"/> | Tuesday/Thursday | 8:45 am – 11:15 am | Tuition: \$135.00 per month |
| <input type="checkbox"/> | Tuesday/Thursday | 11:45 am – 2:15pm | Tuition \$135.00 per month |
| <input type="checkbox"/> | Monday/Wednesday/Friday | 8:45 am - 11:15 am | Tuition \$190.00 per month |
| <input type="checkbox"/> | Monday/Wednesday/Friday | 11:45 am - 2:15 pm | Tuition: \$190.00 per month |

** All class choices are subject to space availability and minimum class size.*

A non-refundable registration fee of \$30.00 is payable upon registration as well as a post-dated cheque (dated September 1) for the first month's fees. Preschool fees can be paid via Post Dated Cheques on the 1st day of each month (September ~ June) payable to "***Mission Association for Community Living***"

Registration Date

Parent/Guardian signature

**** Note: All information contained in this form will remain confidential with the exception of Community Care Facilities licensing who have legal authority to view children's files.***