-		nbowplayschool.gc	l@gmail.co	m>		C	DATE:
Class Preference (major Monday/Wednesday AM		decides final days & times) Tuesday/Thursday AM	9:00 - 11:30an	n			No Preference
Child Information							
Full Given Name							
Preferred Name				Albe	rta Health C	Care #	
Date of Birth		mmm/dd/yyyy		Sex	M 🗖 F		
Child's Address							
Parent Information							
Parent Name(s)							
Parents' Address (if different from child)							
Phone Numbers	Home						
	Mother Cell		Father Cell				
	Mother Work		Father Work				
Email Address							
Siblings (Names and Age	es)						
Emergency Contact Infor	mation (must be	local, and not a parent named a	above)				
Name			Relationship				-
Address							
Phone Numbers	Home						
	Cell						
	Work						
Authorized Persons for P	ickup of Child						
Name			Relationship				Phone
Name			Relationship				Phone
Name			Relationship				Phone
Pertinent Information Rel	ated to the Custo	ody of or Access to the Child					

### Rainbow Playschool <rainbownlayschool acl@amail.com>

#### Allergies

#### Medication

Is your child fully vaccinated per Alberta Health's routine immunization schedule?

Please specify if your child has any medical conditions, developmental delays, disabilities, or behavioral issues:



Revised: April 2024

# **Rainbow Playschool Commitment Form** Subject: Graminia Community League (GCL) Volunteering See Playschool Handbook section 11.1 Graminia Community League Volunteering I agree to complete six (6) hours of volunteer service for the GCL during this school year. I understand that failure to complete 3 hours by January 30 will result in forfeiture of one \$250 GCL Volunteer deposit. I understand that failure to complete 3 hours by June 30 will result in forfeiture of one \$250 GCL Volunteer Deposit. Signature of Parent/Guardian: Date: Subject: Graminia Community League (GCL) Membership See Rainbow Playschool Parent Handbook section 11.2 Graminia Community League Membership I understand that by enrolling my child in Rainbow Playschool, I become a member of the Graminia Community League (GCL) for the calendar years my child is enrolled in the playschool. I agree that, if I wish to become a lifetime member of the GCL, it is my responsibility to ensure that my playschool membership credit is accounted for. Signature of Parent/Guardian: Date: Subject: Parent Roles See Rainbow Playschool Parent Handbook section 13. Parent Roles in the Playschool l agree to participate in one Committee or Non-Committee Role, if required, as detailed in the Rainbow Playschool Parent Handbook. I understand that participation in a Parent Role is required for my child to attend Rainbow Signature of Parent/Guardian: Date: Subject: Duty Parent Responsibities

## See Rainbow Playschool Parent Handbook section 14. Duty Parent Responsibilities

I agree to participate in my required duty days. I understand that, if I cannot attend a duty day, it is my responsibility to arrange for a suitable substitute and inform the Teacher who will be attending. I understand that, if another registered Rainbow Playschool parent acts as my substitute, the day will not count for me on the duty day roster.

Signature of Parent/Guardian:

Date:

Revised: February 2021

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Rainbow Playschool Consent Form								
Subject: Immunization								
Immunization records are located at the	health unit.							
Signature of Parent/Guardian:	Date:							
Subject: Outdoor Activity								
I hereby give consent for my child to take part in supervised outdoor activities at Rainbow Playschool.								
Signature of Parent/Guardian:	Date:							
Subject: Medical Release								
	gency, appropriate health care can be provided to my child.							
Signature of Parent/Guardian:	Date:							
Subject: FOIP Release/Contact Information Distributio	n							
I hereby give consent for any information on the Rainbow	Playschool registration form to be used for playschool							
Signature of Parent/Guardian:	Date:							
Subject: Arts & Crafts Release								
I hereby give consent for any and all of my childs' art work	or crafts to be displayed within Rainbow Playschool.							
Signature of Parent/Guardian:	Date:							
Subject: Photography Release								
I hereby give consent for my childs' photo to be taken and	used for playschool purposes. I understand that this may							
Signature of Parent/Guardian:	Date:							
Subject: Emergency Evacuation								
I hereby give consent for the Teacher(s) and/or scheduled child to the Evacuation Centre (Graminia Community Scho evacuation is declared. I understand that proper safety res belts, may not be available.								
Signature of Parent/Guardian:	Date:							
	Revised: February 2021							