



*Bright Stars Preschool
Mahogany Beach Clubhouse
29 Masters Park SE, Calgary, AB
Registration Form
2024 - 2025*

Thank you for choosing Bright Stars Preschool. We look forward to getting to know your child and family. Please read our registration package and ensure you **fill out the form completely in order for your child's registration to be processed**. If there is an item that does not pertain to your child, please write N/A.

Tuition: \$75.00 administration fee
Two days/week: \$180.00/ month (\$255.00 minus \$75.00 government grant). September 2024 – June 2025.
Three days/week: \$230.00/month (\$305.00 minus \$75.00 government grant). September 2024 – June 2025.
Due at the time of registration: completed registration form and one deposit cheque for either **\$255 or \$305.00**(this includes your admin fee and June 2025 tuition)

***Note: Remaining 9 post-dated cheques will be collected at a later date.**

Returning Families: Please drop off your child's completed registration form and deposit (payable to Bright Stars Preschool) to the school on Wednesday, February 28th, 2024, between 6:00- 7:00pm (**at our Copperfield location – 6 Copperstone Way SE**).

New Families: Please drop off your child's completed registration form and deposit cheque (made payable to Bright Stars Preschool) to the school on Tuesday, March 19th, 2024 between 6:00 pm and 7:00 pm (**at our Copperfield location – 6 Coppertstone Way SE – in the basement**).

**Please note all children must be three years old and potty trained before the school year commences.

Termination Policy: Written notice on or before the 1st of the month prior to the month leaving. For example, if you are leaving April 8th, notice must be provided by March 1st. The initial deposit is completely non-transferrable and non-refundable, there will be no exceptions.

Parent Signature _____ Date: _____

Bright Stars Preschool
Emergency Contact Information

Child's Name: _____
Male: ___ Female: ___ Date of Birth: Month _____ Day _____ Year _____
Home Phone Number: _____
Child's Address: _____
Alberta Health Care Number _____

Parent Contact Information:

1. Parent's Name _____
Phone Number (Home) _____ (Work) _____ (Cell) _____
Email _____
Address (if different from child's) _____

2. Parent's Name _____
Phone Number (Home) _____ (Work) _____ (Cell) _____
Email _____
Address (if different from child's) _____

Emergency Contacts – Please provide us with two people who we could contact in case of emergency or illness and we were unable to contact you.

1. Name _____
Phone Number (Home) _____ (Work) _____ (Cell) _____
Address _____

My child may be released to the following individuals:

My child may NOT be released to the following individuals:

Office Use Only

Immunizations Up to Date: Y N

Medication: Y N

Allergies: Y N

Health Concerns: Y N

Medical Information

Allergies: _____

○ Reaction:___

○ Treatment:_

Medications: **Note: all medication must be in the original container with the original label which states how much, when and how to administer the medication.

Name of Medication: _____

Dose and how to administer: _____

Name of Medication: _____

Dose and how to administer: _____

Ongoing Medication: _____

Food Restrictions: _____

Are your child's immunizations up-to-date? **Yes** **No**

Parent Signature:_____Date: _____

*Bright Stars Preschool
Waivers*

Please complete the two following waivers:

I give permission for the Staff of Bright Stars Preschool to take my child _____, outside on the school premises for daily activities as well as to evacuate the premises on foot incase of a school emergency evacuation.

Child's name

Parent Signature

Date

I give permission for the Staff of Bright Stars Preschool to administer first aid and medical attention to the best of their ability to my child _____, if a medical emergency were to occur during school hours.

Child's name

Parent Signature

Date

Bright Stars Preschool
Getting to Know your Child!

Child's Name: _____

Child's sibling(s) (name and age)

These are a few of my child's favorites:

Food	_____	Activity	_____
Game	_____	Toy	_____
Book	_____	Song	_____

Things you like to do as a family:

Dislikes or fears my child has:

How does your child cope with separation?

Has your child attended Preschool before? (where, when, how often)

Bright Stars Preschool
Class Times
2024 - 2025

Please select your first and second choice. Priority will be given to returning students and then on a first come first serve basis. You will be notified which class your child is in at the time of registration.

Three Year Olds:	<input type="checkbox"/> Monday, Wednesday, Friday	9:00 am – 11:30 am
	<input type="checkbox"/> Tuesday & Thursday	12:15 pm – 2:45 pm
Four Year Olds:	<input type="checkbox"/> Monday, Wednesday, Friday	12:15 pm – 2:45 pm
	<input type="checkbox"/> Tuesday & Thursday	9:00 am – 11:30 am