

# Intake Form

*\*All information is required. Please complete the form and return to the office.*

Permission for photos in daycare only:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please provide your child's photo in colour, with a clear face and no hat. Please attach to this form, or email the photo to bevdaycare1@gmail.com with the child's name.
Permission for photos to be used for marketing purposes (social media, website, media release, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Family Information	
Child Information	Medical Information
First Name:	Alberta Health Care #:
Last Name:	Medical Concerns:
Birth Date:	
Gender:	Dietary Restrictions:
Child Lives With: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian	
Desired Start Date:	Allergies:
Celebrations:	
Cultural Background:	Immunizations Up to Date: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Medication Required: <input type="checkbox"/> Yes <input type="checkbox"/> No <i>*If yes, please explain. See attached medication form.</i>
Custody Agreement in Place? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>*If yes, please provide a copy of the agreement</i>	Comments:
Persons allowed to pick up child, including parent(s) and Guardian(s):	



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Family Information			
Parent/Guardian Information		Parent/Guardian Information	
First Name:		First Name:	
Last Name:		Last Name:	
Relationship to Child:		Relationship to Child:	
Marital Status:		Marital Status:	
Cell Number:		Cell Number:	
Home Number:		Home Number:	
Work/School:		Work/School:	
Work/School Number:		Work/School Number:	
Home Address:		Home Address:	
City:	Province:	City:	Province:
Email:		Email:	
Cultural Background:		Cultural Background:	

Emergency Contact Information		Emergency Contact Information	
First Name:		First Name:	
Last Name:		Last Name:	
Relationship to Child:		Relationship to Child:	
Cell Number:		Cell Number:	
Home Number:		Home Number:	
Home Address:		Home Address:	
City:	Province:	City:	Province:
Authorized to Pick Up Child: <input type="checkbox"/> Yes <input type="checkbox"/> No		Authorized to Pick Up Child: <input type="checkbox"/> Yes <input type="checkbox"/> No	



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Emergency Contact Information		Emergency Contact Information	
First Name:		First Name:	
Last Name:		Last Name:	
Relationship to Child:		Relationship to Child:	
Cell Number:		Cell Number:	
Home Number:		Home Number:	
Home Address:		Home Address:	
City:	Province:	City:	Province:
Authorized to Pick Up Child: <input type="checkbox"/> Yes <input type="checkbox"/> No		Authorized to Pick Up Child: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Fees & Subsidy	
Fees	Subsidy
Who is responsible for paying account?	<input type="checkbox"/> Subsidy approved and confirmation is attached <input type="checkbox"/> I have applied for subsidy <input type="checkbox"/> I will apply for subsidy <input type="checkbox"/> I do not plan to apply for subsidy
Fee Agreement Signed: <input type="checkbox"/> Yes <input type="checkbox"/> No	Subsidy Amount: \$
Comments:	Application Date:
	Comments:



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## Fee Policy

The Beverly Day Care Society & Family Resource Centre will be hereafter referred to as the “Centre”.

### PURPOSE

To establish expectations and procedures regarding Child Care fees. To ensure Families understand their responsibility for fee payments and the implication of outstanding fees.

### POLICY STATEMENT

All families are to be made aware of the Centre’s Fees Policy on enrollment to ensure an understanding of their responsibility for outstanding fees and payments including those resulting from subsidy adjustments. Families not on subsidy will be responsible for full fee payments

### PROCEDURE

- **General Fees**
  - Monthly fees are due the first day of each month. If fees have not been paid by the end of the month, and arrangements for payment plan have not been made with the Executive Director, parents/families will forfeit their program space.
  - Payment methods are debit, cash or cheque.
  - Cheques are to be made payable to Beverly Day Care Society & Family Resource Centre.
  - Parent/Guardian must sign a fee agreement contract. The contract will be kept in the child’s file in the Centre’s office and a copy given to the Parent/Guardian.
  - When paying by cash or cheque, these will be documented on the parent’s account. A receipt will be issued and kept for distribution in January for income tax purposes. Parents may request receipts when payments are made.
  - Monthly fees will not be reduced due to child absences. Absences include vacations, sick days, statutory holidays, and school closure days.
  - Fees in arrears for 1.5 or more months will be sent to collections, you will be notified of the decision to send the account to collections.
  
- **Notice of withdrawal**
  - 1 full months’ notice (on or before the 1<sup>st</sup> day of the present month) must be given in writing to the Executive Director in order to withdraw your child from the Centre without an extra month’s fee being charged to the parent(s).



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- **Subsidy**

- The Centre has no authority in determining a family's subsidy eligibility. Eligibility is determined by the provincial funding authority.
- Parents are to apply for subsidy once they have had confirmation of space.
- Proof of subsidy approval must be provided to the Executive Director and a copy will be kept in the child's file.
- Parents are responsible for any lapse in subsidy approval or renewal.
- Proof of subsidy renewal must be provided prior to expiry date of current subsidy.
- Alberta Child Care subsidy attendance requires a minimum of 100 hours per month unless otherwise stated in the subsidy documents. If these hours are not met, an adjustment may be determined by the provincial funding authority leaving a difference between original and adjusted subsidy amounts and resulting in a balance owing/outstanding to the Centre.
- Payments of outstanding fees are the sole responsibility of the Parent/Guardian of the child and are due by the end of the month of balance owing notification.

- **Late Pick-up Fees**

We ask that parents be conscientious of the Educator's time. They have worked a long day and would like to get home to their families as well. The Centre closes at 6:00 pm promptly and we ask that parents be at the Centre by 5:45 pm.

If a child remains in the Centre after 6:00 pm, a late pickup fee will be assessed as follows:

- A charge of \$10.00/per child for the first five minutes or portion thereof and \$2.00 for every minute thereafter.
- The Closing Designate Director will determine the time based on the correct time on her/his cell phone.
- When a late pick up occurs, the Parent will be asked by the staff to sign a late pick-up form. A notice will be issued to the family and to administration regarding the late pick-up and documented.
- If late charges are not paid in full by the end of the month, it will become part of the monthly fees due and remain on the account until paid.
- Three late pick-ups or more, may result in forfeit of program space.



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## Monthly Day Care

	0 – 18 Months	19 Months – 5 Years
<b>Fulltime</b>	\$1,045.00	\$880.00
<b>4 Days / Week</b>	\$836.00	\$704.00
<b>3 Days / Week</b>	\$627.00	\$528.00
<b>2 Days / Week</b>	\$418.00	\$342.00

## Daily Drop-Ins

	0 – 18 Months	19 Months – 5 Years	Kinder – 12 years (OSC)
<b>Full Day*</b>	\$60.00	\$50.00	\$40.00
<b>Half Day*</b>	\$30.00	\$25.00	\$20.00

*\*Please note drop-ins must be booked one week in advance of requested day*

## Monthly Out of School Care

*Servicing Ivor Dent and St Jerome Schools*

	Kinder – 12 Years Fulltime	4 days/week	3 days/week	2 days/week
<b>September – June</b>	\$575.00	\$460.00	\$345.00	\$230.00
<b>July – August</b>	\$625.00	\$500.00	\$375.00	\$250.00

### Additional Notes:

1. A registration fee of \$60.00 will be charged at the time of registration and will be subtracted from the first month's fees.
2. A Registration Package must be completed prior to your child attending the centre.
3. Subsidy approval, where applicable, must be confirmed prior to your child attending the centre.
4. All fees are non-refundable and must be paid on the 1<sup>st</sup> of each month for the upcoming month.
5. Half days are 6:30AM to 12:30PM, or 12:30PM to 5:30PM. Full day rates are applicable for children staying outside of these allotted hours.
6. Parents are required to volunteer a minimum of 20 hours per year. Multiple volunteer opportunities will be available throughout the year. Failure to participate will result in a \$200.00 charge.



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## Fee Agreement/Contract

Child's Name(s): \_\_\_\_\_

This agreement is a legal and binding contract between the Parent(s)/Guardian(s) and the Beverly Day Care Society & Family Resource Centre (Society). Please ensure that all terms and conditions are thoroughly discussed, and clearly and accurately recorded in the agreement.

Parent(s)/Guardian(s) are required to read and understand our Fee Policy and a copy is to be attached to the parent's copy of this agreement.

I (we)

\_\_\_\_\_  
(Print Parent(s)/Guardian(s) name(s) who are responsible for paying fees to the Day Care)

hereby acknowledge that fees are to be paid according to the Fee Policy set by the Beverly Day Care Society & Family Resource Centre.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date



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## Spontaneous Outings

*\*A **MINIMUM** of 2 staff are required for any outing outside the premise of the daycare. \**

I \_\_\_\_\_, hereby give permission to the Beverly Day Care  
Print Parent/Guardian's Name  
Society & Family Resource Centre to take my child, \_\_\_\_\_,  
Print Child's Name  
on spontaneous walks and outings off the Centre premises.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian signature





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## Child's Patterns and Habits

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

Please briefly describe an ordinary day in your child's life:

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What is your child's favorite activity: \_\_\_\_\_

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Does your child have any habits or mannerisms (thumb sucking, nail biting etc.)? Please describe: \_\_\_\_\_

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Does your child have any fears, such as dogs, loud noises etc.? Please describe:

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Does your child use particular words or expressions that may not be understood by others? Please describe: \_\_\_\_\_

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In general, how does your child react to transition or stressful situations? Crying, withdraws, tantrums etc. Please describe:

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Has your child been in Day Care before? \_\_\_\_\_ Yes \_\_\_\_\_ No



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How does your child relate to other children? Please describe:

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Has your child had experience being cared for by adults and/or members of your family? Please describe:

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What is your accustomed way of reassuring or rewarding your child? Please describe:

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What is the practice of discipline you use at home with your child? Please describe:

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Does your child speak English at home? \_\_\_\_\_ Yes \_\_\_\_\_ No.

What other languages does your child speak at home: \_\_\_\_\_

Does your child have any challenges or disabilities that we should be made aware of? Please describe:

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Other comments or additional information that you feel will help to make your child's experience with us successful. Please describe:

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