



A place for your child to grow and for you, peace of mind

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110 Gordon Drummond Ave.

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L8J 1P5

REGISTRATION AGREEMENT

Child's Name: _____

Start Date: _____

In registering and permitting my child to attend Kindertown Child Care, I _____ the undersigned parent/guardian hereby agree as follows;

Parent Name

- To permit my child to participate in the full range of activities.
- I agree to let my child go on supervised excursion outside the Child Care Centre. I will not hold Kindertown Child Care responsible for any accidents that may occur.
- I will not hold Kindertown CC responsible for any lost or stolen articles.
- I understand that photographs and or video taken at the centre may be used in promotional material and for HI MAMA. I hereby consent to such use by Kindertown Child Care Centre.
- I have read the Kindertown Child Care Centre's abuse policy and understand the legal obligation of the staff to report any suspected abuse.
- I will abide by the policies set forth in the parent handbook and by the subsequent notices which serve as changes or adjustments to the handbook.
- I understand that all registration /enrollment forms for my child, including the medical record must be completed before my child may attend the centre.
- I will abide by all policies set forth by Kindertown Child Care Centre and I am aware of the Centre's hours of operation. I understand that a late fee of a **dollar a minute** will be charged if I am late picking up my child. I am aware of closing and statutory holidays and closing due to inclement weather.
- I understand that all authorized individuals picking up my child must be on the emergency contact form and will be asked to provide identification upon pick up. I will also provide verbal or written notice of any changes to the individual picking up my child or if regular pick up or drop off will change.
- I understand that all medical information must be **updated annually**. I will also notify the centre immediately of any changes in my child's health or family situation that would affect the registration information.
- I have read and understand the payment structure and cancellation and refund policies.

Please note that any changes to the information in these forms **MUST** be made in writing.

Date: _____

Signature: _____