

GW Carlson and JS Clark Kidz Klubs

Registration Package 2023-2024

JS Clark Kidz Klub is located in the Northern Rockies Clubhouse at
4200 45th Street (Next to the JS Clark Elementary School)

GW Carlson Kidz Klub is located at the GW Carlson Elementary School
5617 51st Street North (Portable behind the school)

Email for Both Kidz Klubs is:

gwcarlson.kidzklub@gmail.com

Children returning to Kidz Klub for the 2023-2024 school year must have updated information filled out to meet licensing standards.

Please fill out and sign the following pages if your child was registered during the 2022-2023 school year.

***Mandatory updates and signatures**

| | |
|---|--|
| | if your child has had any updated immunizations this school year please provide a copy |
| | If you have an updated custody order please provide a copy |
| | Page 2 If any changes to allergies or medication update this section |
| * | Page 3 sign and date – agreement of pictures, fieldtrips and bussing |
| * | Page 4 check dates you would like care |
| * | Page 5 & 6 Read the financial agreement and sign |
| * | Page 7 to 9 Read and sign the Waiver and Release |
| * | Page 10 fill out an updated emergency Care form |
| * | Page 11 read and sign the consent for emergency services |

Forms can be dropped off at the
Fort Nelson Family Development Society
5012 Airport Drive, Fort Nelson, B.C.
Phone: 250-774-2596 Fax: 250-774-2831

Or emailed to:

gwcarlson.kidzklub@gmail.com

Today's Date: _____

Child's Full Name: _____

Gender Identity: _____ Date of Birth: _____

Does your child identify as Indigenous? Yes _____ No _____

School Attending: _____ Grade: _____

Mailing Address: _____ Street Address: _____

Fort Nelson BC V0C1R0

Home Phone Number: _____ Email: _____

Primary Parent/Guardian Name: _____ Cell Number: _____

Parent/Guardian Name: _____ Cell Number: _____

Would you like both parents/guardians to be contacted with any Kidz Klub information?

Yes: _____ No: _____ if no, the primary parent will be the only parent contacted.

Do you have a custody order in place? Yes: _____ No: _____

If yes, please provide a copy with this registration form.

Child Information

Immunizations

Are all immunizations up to date? Yes _____ No _____

If No, please sign the following: I have chosen not to immunize my child

_____ (Parent Signature)

A photocopy of immunization must be available to complete registration.

Allergies

Does child have any allergies? Yes _____ No _____

If yes, fill out the chart below.

| List Allergies or Intolerances | Check the Medical Condition | | | Symptoms: |
|--------------------------------|-----------------------------|-----|----|-----------|
| | Intolerance | Yes | No | |
| | Allergy | Yes | No | |
| | Intolerance | Yes | No | |
| | Allergy | Yes | No | |

(If you require more room, please provide information on the back of this page)

Medications

Is your child on any medication? Yes, _____ No _____ if yes, please fill out the chart below.

| | |
|---|---|
| Name of Medication: | Reason for Medication: |
| Will this medication need to be given at the Preschool Program? | Possible side effects or things for staff to be aware of: |

Are there any cultural beliefs, traditions, or others information you feel we should know about, or that may affect your child’s participation?

KIDZ KLUB ACTIVITIES

Field Trips

I hereby grant permission for my child to leave the Kidz Klub, under the supervision of staff members for walks and/or field trips and if needed in an authorized vehicle.

Yes _____ No _____

_____ Signature (parent/guardian)

Pictures & Videos

I give permission for the staff of the Kidz Klub to take pictures/video shots of my child while taking part in the program. These photos may be displayed in the classrooms, sent home with the children, shared on our newsletters or posted on our website or Facebook / Instagram page.

Yes _____ No _____

_____ Signature (parent/guardian)

Bussing

Fort Nelson Family Development Society has contracted the Northern Rockies Senior’s Society to provide bussing between the Kidz Klubs and community locations The Kidz Klubs will have a staff member on the bus to monitor the children and be available if an issue or an emergency arises. This service is covered by a grant received by the Fort Nelson Family Development Society.

By signing below, I acknowledge that I am giving the Fort Nelson Family Development Society Kidz Klubs my permission to transport my child on the Northern Rockies Senior’s Bus between the Kidz Klub locations and community locations.

_____ Signature (parent/guardian)

_____ Date

Please check the days you would like your child to attend:
 (Parents are requested to choose a minimum of two days a week.
 You may choose a maximum of five days a week)

| | | | |
|--|-----------|--------------|--------------|
| | Monday | 3:00-5:30 pm | \$72.5 month |
| | Tuesday | 3:00-5:30 pm | \$72.5 month |
| | Wednesday | 3:00-5:30 pm | \$72.5 month |
| | Thursday | 3:00-5:30 pm | \$72.5 month |
| | Friday | 3:00-5:30 pm | \$72.5 month |

Kidz Klub selection will be first come first serve so please return this registration package to the Kidz Klub Leader or Family Development Society's Main Office at 5012 Airport Drive as soon as possible indicating your choices. You will receive a confirmation email once registration forms and payment have been received.

| | |
|---|---|
| After School Care Bell Time to 5:30pm | Pro-d Days/Non Instructional Days/ Spring and Summer Camps |
| <i>Staff will meet the children at the end of the day bell at the designated meeting place Parent pickup time will be no later then 5:30pm.</i> | <i>Times and schedule will be set when Dates approach and SD81 releases their 2023-2024 schedule.</i> |

| Kidz Klub Closure Dates | |
|--|--|
| Labour Day - September 4 | Family Day - February 19 |
| National Day for Truth and Reconciliation - September 30 | Good Friday /Easter Monday – March 29 to April 1 |
| Thanksgiving - October 9 | Victoria Day – May 20 |
| Remembrance Day - November 11 | Canada Day – July 1 |
| Christmas Break - December 16 to December 31 | BC Day – August – August 5 |
| New Years Day – January 1 | |

Financial Obligation / Withdrawal Agreement

We accept etransfers, checks, cash, or money order. We do not accept credit cards or debit cards. A \$50 NSF charge will be charged to you on any returned checks.

This agreement will exist for the full length of time your child is in our Kidz Klub program. It is our goal to keep our tuition as low as possible while maintaining the excellence of the program to which we are committed in the face of rising costs. We would like you to know the following:

1. There is a one-time \$50 non-refundable registration/supply fee for first time registrants
2. Fees are annually based and then divided into 10 months.
 - the Kidz Klub 10 month fees include all Full Day costs for Pro-d Days and Non Instructional Days
 - The Kidz Klub Programs will be closed for all stat holidays. (These closures have been incorporated into your annual cost. No refund will be provided)
 - the December rates are pro-rated to account for the 2 week program closures
 - the March fees are pro rated to account for the 2 week Spring Break.
 - A two-week spring break camp can be registered for at an additional cost.
 - A special Summer Camp will be run during SD81's summer closure. We will have registration at an additional cost for full days.
3. The Kidz Klub will provide a reduction of fees of \$17.50 per class on your following months invoice for any unscheduled closures.
4. Our Kidz Klubs qualify for the BC Child Care Fee Reduction Program and qualifying programs will be credited each month.
3. The preferred method of payment is by etransfer to gwcarlson.kidzklub@gmail.com password: Clubhouse1)
4. We also accept etransfers, cash, checks and money orders with no additional charge.
5. ALL Payment types are due on the 10th of the month and must be made no later than the 15th of each month.
6. The Affordable Child Care Benefit (Subsidy) is accepted. It is your responsibility to ensure that all subsidies are in place for your child's program. It is also your responsibility to cover any expense not covered by subsidy
7. If you are withdrawing your child, you must notify us by the 15th of the previous month. As we do not pro-rate monthly fees.
8. If you notify us of your child's withdraw later than the 15th of the previous month: You will be charged a "late notice fee" of \$150.00
9. In an effort to keep costs down, we email monthly invoices/ receipts.
10. A statement of account is issued each month by email
11. If tuition fees are 30 days overdue, with no connection with the Kidz Klub Manager your child's space will be given up to the waitlist.

12. The Fort Nelson Family Development Society is committed to supporting families and if you require financial assistance to attend the Kidz Klub please talk to Cindy Southwick, Executive Director 250-774-2596.

I have read the above information and agree to this financial agreement.

DATE: _____

Parent Name: _____ Signature: _____

| REGISTRATION CHECKLIST: | |
|---|---|
| The following completed forms are needed for the registration to be accepted. | |
| | Registration Form |
| | Immunization Records (we know this request can take time from Public Health – please submit asap) |
| | Custody orders |
| | Emergency Contact Sheet |
| | Waiver and Release form |
| | Financial Agreement |
| | \$50 registration/supply fee |
| | |
| <i>You will receive a confirmation of enrollment once all paperwork has been processed</i> | |
| First month’s Kidz Klub fee are non-refundable You will be emailed an invoice in August for September’s fee and they are due by September 1 to secure your space | |

Waiver & Release

THIS ACTIVITY WAIVER & RELEASE (this "Agreement") dated this _____ day of _____, 20_____

BETWEEN:

Child's Name: _____

Date of Birth: _____

(The "Participant")

AND

Fort Nelson Family Development Society of 5012 Airport Drive, Fort Nelson, BC V0C1R0,

Northern Rockies Clubhouse: JS Clark Kidz Klub, 4200 54th Street, Fort Nelson, BC V0C1R0

And

GW Carlson Kidz Klub, 5617 51st Street North, Fort Nelson, BC V0C1R0

(Collectively the "Activity Provider")

OF THE SECOND PART

IN CONSIDERATION OF the covenants and agreements contained in this Agreement and other good and valuable consideration, the receipt of which is hereby acknowledged, the parties to this Agreement agree as follows:

Consideration

1. Being of lawful age and in consideration of being permitted to participate in the activity described below, the Participant releases and forever discharges the Activity Provider, the Activity Provider's spouse, heirs, executors, administrators, legal representatives and assigns from all manner of actions, causes of action, debts, accounts, bonds, contracts, claims and demands for or by reason of any injury to person or property, including injury resulting in the death of the Participant, which has been or may be sustained as a consequence of the Participant's participation in the activity described below, and notwithstanding that such damage, loss or injury may have been caused solely or partly by the negligence of the Activity Provider.

2. The Participant understands that the Participant would not be permitted to participate in the activity described below unless the Participant signed this Agreement.

Details of Activity

3. The Participant will participate in all activities offered by the:
JS Clark and GW Carlson Kidz Klub Programs July 1, 2023 to June 31, 2024.

Concurrent Release

4. The Participant acknowledges that this Agreement is given with the express intention of effecting the extinguishment of certain obligations owed to the Participant and with the intention of binding the Participant's spouse, heirs, executors, administrators, legal representatives and assigns.

Fitness to Participate

5. The Participant acknowledges that the Participant does not have any physical limitations, medical ailments, physical or mental disabilities that would limit or prevent the Participant from participating in the above mentioned activity. If required, the Participant will obtain a medical examination and clearance.

Full and Final Settlement

6. The Participant hereby acknowledges and agrees that the Participant has carefully read this Agreement, that the Participant fully understands the same, and that the Participant is freely and voluntarily executing the same.
7. The Participant understands that by signing this Agreement, the Participant agrees to be forever prevented from suing or otherwise claiming against the Activity Provider for any property loss or personal injury that the Participant may sustain while participating in or preparing for the above noted activity.
8. The Participant has been given the opportunity and has been encouraged to seek independent legal advice prior to signing this Agreement.
9. This Agreement contains the entire agreement between the parties to this Agreement and the terms of this Agreement are contractual and not a mere recital.

Governing Law

10. This Agreement will be governed by and construed in accordance with the laws of the Province of British Columbia.

IN WITNESS WHEREOF the Participant and Activity Provider have duly affixed their signatures

under hand and seal on this _____ day of _____, 20_____

Parent/Guardian's Signature _____

Parent/Guardian's Name (print)_____

Fort Nelson Family Development Society
Executive Director

Per: _____

Emergency Information

The information on this sheet will be used if child is not picked up on time, will travel with staff on any outings away from the clubhouse or given to medical authorities if your child is transported for a medical emergency

Child's Name: _____ Birthdate: _____

Home Street Address:

Parent/Guardian Name: _____ Ph. (cell) _____

Parent/Guardian Name: _____ Ph. (cell) _____

Child's Doctor: _____ Ph. _____

Care Card Number: _____ Province: _____

Medications: _____

Medical Conditions/Allergies: _____

The list below will be contacted if we are not able to reach the parent /guardian.

Emergency Contact Name: _____ Ph. (cell) _____

Emergency Contact Name: _____ Ph. (cell) _____

Persons authorized to pick up child -other than parents/guardians:

Name: _____ Relationship to Child: _____

Name: _____ Relationship to Child: _____

Name: _____ Relationship to Child: _____

Name: _____ Relationship to Child: _____

Under NO circumstances will child be released to anyone without written authorization from parent /guardian – this is required by our License.

Consent to Emergency Care

If, at any time, due to such circumstances as injury or sudden illness, medical treatment or emergency action is necessary, I authorize the Fort Nelson Family Development Society: GW Carlson and JS Clark Kidz Klub staff to take whatever measures they deem necessary for the protection of my child while in their care. I understand this may involve calling a doctor, interpreting, and carrying out their instructions and transporting my child to a hospital or doctor's office, including the possible use of an ambulance. I understand this may be done prior to contacting me and that any expense incurred for such treatment, including ambulance fees, are my responsibility.

Yes _____ No _____

_____ Signature (parent/guardian)

_____ Date

