



REGISTRATION DAY FORM

2018/2019 SCHOOL YEAR

***Please print clearly or Fillable PDF**

Child's Legal Name (Last, First): _____

Gender: Male Female

Child's Birthday (year-mmm-dd): _____ - _____ - _____

Family Registration Fee \$100 Cash / Chq
(Cheques payable to "QPPS", One fee per family)

New Student Registration

New Student : Class Preference (choose 1): 3AM 3PM 4AM 4PM AM=morning PM=afternoon

If QPPS Past Alumni, Sibling or Parent name: _____ > Last Year Attended : _____

Office: Duty Parent Info On File? YES / NO

Currently Enrolled Returning Student Registration Info

Returning Student: 3AM to 4AM 3PM to 4PM 4AM/PM to 4AM 4AM/PM to 4PM

If you wish to switch your class time next year between AM/PM please contact enroll@qpps.ca

Parent A

Also applying as New Duty Parent? Yes / No Receive QPPS Info ? Yes / No

Name (Last, First): _____ Occupation: _____

Primary Phone: _____ Cell Home

Secondary Phone: _____ Cell Home Work Email: _____

Parent B

Also applying as New Duty Parent? Yes / No Receive QPPS Info ? Yes / No

Name (Last, First): _____ Occupation: _____

Primary Phone: _____ Cell Home

Secondary Phone: _____ Cell Home Work Email: _____

Child's Home Address: _____

Child's residence status: Both parents Parent A Only Parent B Only Other : _____

Child's Home Phone (if not indicated above): _____

Additional New Duty Parents? Note: Existing Duty Parent Info will carry forward to the next year and is valid for 5 years

Name / Relationship : _____ Name / Relationship : _____

Note: Duty parents can be a grandparent, aunt, uncle, legal guardian, foster parent to the child. This person must complete the same consent, reference, medical and background check forms as a parental duty parent, complete all orientation requirements, and may attend the monthly general meetings on behalf of the family. Contact enroll@qpps.ca for additional duty parent package forms if needed.

Class List Contact Release Consent

- Each year, Queen's Park Preschool releases contact information in the form of Class Lists to other current members and the preschool teachers. This information is also retained to determine alumni status. Please indicate your consent to release your family contact information to be used solely for preschool business, by signing below.

Parent's Signature for Class List Consent : _____ > I am Parent A Parent B