



MID-SUN COMMUNITY CHILD CARE MID-SUN OOSC/ GRADES 1 TO 6 2026/2027 REGISTRATION FORM

***All fields must be completed, please print clearly and in blue or black ink**

Start Date: _____

Termination Date: _____

Parent/ Guardian:

* Create an ActiveNet Account * Credit Card on ActiveNet account * Paid- \$75 Annual Registration Fee (Non-refundable/Non-transferable)

Licensed Child Care representative- to complete after reviewing the necessary documents Applies to new families only

* Verified identity of the child and their relationship to the parent/guardian (e.g., birth certificates, court orders).
* Verified that parents/ legal guardians presenting themselves as an authority to give consent are 18 years of age and older by physically and visually reviewing government identification.

* **Component(s):** Before and After School Care After School Care Before School Care

* School: St Teresa of Calcutta Midnapore Elementary Other

* Child's Legal Name: _____ *Preferred Name: _____
first name last name name by which child is commonly goes by

* Date of Birth: ____/____/____ *Grade for 25/26 school year: _____
month day year

1st Legal Guardian Info/ Mother

2nd Legal Guardian Info/ Father

* Legal Name: _____ * Legal Name: _____
first name last name first name last name
* Preferred Name: _____ * Preferred Name: _____
* Cell #: _____ * Cell #: _____
* Email: _____ * Email: _____
* Address: _____ * Address: _____
* Postal Code: _____ * Postal Code: _____

* **Persons authorized to pick up child** (please provide legal documents for any person NOT ALLOWED to pick up):

Alternate Emergency Contact: (Must be someone other than a parent and live locally)

* Name: _____ * Relationship: _____
First name last name
* Contact Phone #: _____ Cell Home

Health Care Information: * Allergies?: YES NO If YES please list:

* Does your child take any ongoing medication? (i.e. Inhaler for Asthma; Epi-Pen/ Benadryl for allergies; ADHA medication; etc.)
 YES NO If YES please list:

* Does your child have a history of health issues or have any special needs?(i.e. dietary restrictions; diabetic; prone to headaches; hay fever, etc.)
 YES NO If YES please list:

* Are your child's immunizations up to date? YES NO

The information given on this form is true and correct. I understand that I must keep the Program updated with any changes to the personal information stated on this form. The above information will be shared with the government.

* Parent/ Legal Guardian Printed Name

* Parent/ Legal Guardian Signature

* Date



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MID-SUN COMMUNITY CHILD CARE CONSENT WAIVERS That MUST BE SIGNED

The following waivers pertain to _____;

Child's full name

ACCIDENT POLICY: I hereby agree that if my child has an accident and is seriously injured while attending the Out of School Care Program, the Mid-Sun Community Child Care Program Educators will:

- Administer immediate first aid
- Call 911
- Contact the parent/legal guardian or the child's emergency contact immediately after calling 911
- Report each incident to the Statutory Director forthwith in the manner required by the Statutory Director.

* _____ Parent/ Legal Guardians Initials of Acknowledgement

ILLNESS POLICY: I hereby agree to daily assess my child's health and agree to keep my child at home if ill and understand that if my child exhibits **ANY SYMPTOMS OF ILLNESS** in Out of School Care, that my child must be removed from the program **IMMEDIATELY**.

Furthermore, I acknowledge that my child may not return to care until they have been symptom-free for 24 hours and feel well enough to participate, or until a doctor's note is provided in accordance with the Early Learning and Child Care Regulations and AHS guidelines.

* _____ Parent/ Legal Guardians Initials of Acknowledgement

SHARING OF INFORMATION: I hereby give consent to the Mid-Sun Community Child Care to share child-specific information regarding my child with relevant stakeholders, including government agencies, child care services, and the Midnapore School administration and teachers. I understand that a record of the information shared will be maintained where applicable.

* _____ Parent/ Legal Guardians Initials of Consent

I acknowledge that I have read and fully understood the Mid-Sun Community Child Care Policies and Procedures as outlined above.

* Parent/ Legal Guardian Printed Name

* Parent/ Legal Guardian Signature

* Date



**MID-SUN COMMUNITY CHILD CARE
ELECTIVE CONSENT WAIVERS**

PERMISSION AUTHORIZING THAT A CHILD MAY LEAVE THE PROGRAM UNACCOMPANIED BY AN ADULT

I authorize my child to leave the Out of School Care Program UNACCOMPANIED BY AN ADULT when instructed to do so by a parent/legal guardian and OOSC staff. I agree to release from liability the Mid-Sun Community Child Care from any illness, injury or accident occurring once the child has left the program.

Parent/Guardian Printed Name Parent/Guardian Signature Date

PERMISSION AUTHORIZING THAT A CHILD MAY WALK TO/FROM SCHOOL UNACCOMPANIED BY AN ADULT

I authorize my child to walk to school UNACCOMPANIED BY AN ADULT (i.e. patrols, etc.) I agree to release from liability the Mid-Sun Community Child Care from any illness, injury or accident occurring during this time.

Parent/Guardian Printed Name Parent/Guardian Signature Date

MEDIA CONSENT: I hereby give permission for Mid-Sun Community Child Care Program to take my child's photograph, display their artwork, and record videos for program use, internal promotional purposes (such as displaying photo albums for new families), and documentation in perpetuity.

I provide this consent with the understanding that these photos and recordings will not be posted on any form of social media.

Parent/Guardian Printed Name Parent/Guardian Signature Date

FAMILY PROFILE INFORMATION

***Family Information**- any custody arrangements; fee splitting, step parents; who has signing authority, etc:

*What Languages are spoken at home: _____

*Cultural background (i.e. English, Chinese, Scottish, Indian, Sudanese, etc.): _____

What do you as a family celebrate (i.e. Christmas, Kwanza, Chinese New Year, Diwali, etc.) _____

Special family traditions: _____

Special interests and abilities (i.e. plays hockey/soccer/piano, dances, etc.): _____



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MID-SUN COMMUNITY CHILD CARE
TRANSPORTATION TO AND FROM SCHOOL CONSENT WAIVERS
FOR CHILDREN IN GRADES 1 TO 6 WHO ATTEND ST TERESA OF CALCUTTA

I hereby consent for my child, _____ to be:

Child's full name

TRANSFER TO SCHOOL- ECOLE ST TERESA (times according to 2025/2026 school year and are subject to change)

- Description of Activity: To transfer children to the Ecole St Teresa School play field from the Mid-Sun Community Child Care program located in the Mid-Sun Community Centre.
- Duration of Activity: Children will leave the Community Centre by 8:40am for the 8:50am school start time. It will take ~5 minutes as staff and children must walk around the parking lot or south side walk..
- Transportation: Walking
- Supervision: The Mid-Sun OOSC staff will supervise the children at all times. Children will be put into groups if applicable; staff will carry walkie talkies and there will be a cell phone for in case of emergencies. The Mid-Sun OOSC staff will ensure that minimum staff to children ratio will be adhered to at all times.
- IMPORTANT ARRIVAL POLICY:** All children registered for morning transport service **must** arrive **no later than 8:40am**. This is a strict departure time for the transportation to St Teresa. Children arriving after 8:40 am will not be permitted to join the transport group, as staff will have already departed. Furthermore, please be advised that there will be **no supervision available** for any children who arrive late to the facility after the 8:40 am departure time. Parents/Guardians are solely responsible for ensuring their child arrives at the facility on time or arranging alternative transportation to the school if the 8:40 am deadline is missed.

TRANSFER FROM SCHOOL- ECOLE ST TERESA (times according to 2025/2026 school year and are subject to change)

- Description of Activity: To transfer children from the Ecole St Teresa School play field to the Mid-Sun Community Child Care program located in the Mid-Sun Community Centre.
- Duration of Activity: Children will leave the Ecole St Teresa School play field by 3:30pm to accommodate gathering everyone as school lets out at 3:15pm. It will take ~10 minutes as staff and children must walk around the parking lot.
- Transportation: Walking
- Supervision: The Mid-Sun OOSC staff will supervise the children at all times. Children will be put into groups if applicable; staff will carry walkie talkies and there will be a cell phone for in case of emergencies. The Mid-Sun OOSC staff will ensure that minimum staff to children ratio will be adhered to at all times.
- Children may walk to Mid-Sun Community Child Care program from the Ecole St Teresa School without staff supervision if permission authorizing a child to walk to and from school unaccompanied by an adult is signed.

I acknowledge that I have read and fully understood the Mid-Sun Community Child Care Transportation waivers as outlined above.

* Parent/ Legal Guardian Printed Name

* Parent/ Legal Guardian Signature

* Date



MID-SUN COMMUNITY CHILD CARE
COMMUNITY EXCURSION WAIVER

The Programs will “regularly” utilize the Community Outdoor Spaces that are within safe and easy walking distance as deemed appropriate by Licensing and the Mid-Sun Community Child Care from the Mid-Sun Community Center throughout the school year. Activities may be planned of spontaneous.

Date and Times: Families will be made aware of any community excursions by either monthly newsletters, emails, texts or signs posted in a prominent location.






Transportation: we will be walking from the Midnapore School

Children will require- to be dressed appropriately for the weather and activity.

Supervision- The children will be supervised by the Midnapore OOSC Educators at all times. Educators will carry emergency cards, first aid kits, may carry walkie talkies and there will be a cell phone for in case of emergencies. The Midnapore OOSC will ensure that minimum Educator to child ratio will be adhered to at all times.

To contact the Program while Off-site: please call 403-256-4422

***Description of Activity:** Please initial those excursions you are consenting your child to participate in

Initial of Consent	Community Excursion (walking times according to google maps)
* 	Midnapore School- 55 Midpark Rise SE (35m, ~ 2 minute walk). Spaces utilized- gym, we will occasionally mix the two OOSC programs for special events (i.e. magician, carnivals, etc.) during the school year.
* 	Surrounding Field Spaces- Fields south and west of the Mid-Sun Community Centre, excluding the Skate Park; Daily when weather permits. Outdoor space consists of ~6 foot fencing along Midlake Blvd and residential housing make up the borders.
* 	CBE Midnapore School Playground- 55 Midpark Rise, SE, ~2 minute walk. Daily when weather permits. Outdoor space consists of ~4 foot fence adjacent to cul-de-sac, school grounds and large green space which backs onto residential housing making up the other borders so as to enable Educators to view children at all times.
* 	CCSD St. Teresa of Calcutta School Playground- 121 Midlake Blvd SE, (500m, ~3 minute walk). Daily when weather permits. Outdoor space consists of ~6 foot fencing on the north perimeter along Mid-Lake Blvd, school grounds and large green space which backs onto residential housing making up the other borders so as to enable Educators to view children at all times.
	Midnapore Lake- 185 Midlake Blvd SE, (700m, ~10 minute walk). Monthly as weather permits. The lake offers a variety of activities during all seasons, such as skating, playgrounds, opportunities for nature walks, ample space for games and activities. The Lake is ~30 acres in size and is surrounded by ~7 foot chain link fence as well as a manned entrance for extra security. Facility includes 2 washrooms. The following are some of the rules we will adhere to while at the lake: <ul style="list-style-type: none"> ● Skating- children must wear a helmet, regardless of whether they are playing hockey or skating on the upper rink. Children need to supply their own skates, helmets, hockey sticks and pucks.

	<p>Fish Creek Provincial Park, Glennfield Day Use Area- 14428 Bannister Rd SE, (1.9km, ~25 minute walk). Twice annually when weather permits. Fish Creek offers the opportunity to explore the natural environment by providing areas for nature walks and talks, and ample space for games and year round activities. Washrooms as open all year.</p>
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Child care will not be provided on-site during community excursions as all of the Program's Educators will be required for the activity to maintain proper ratios. If consent is not given or retracted for any given community excursion, children may not attend on those days where the activity has been planned.

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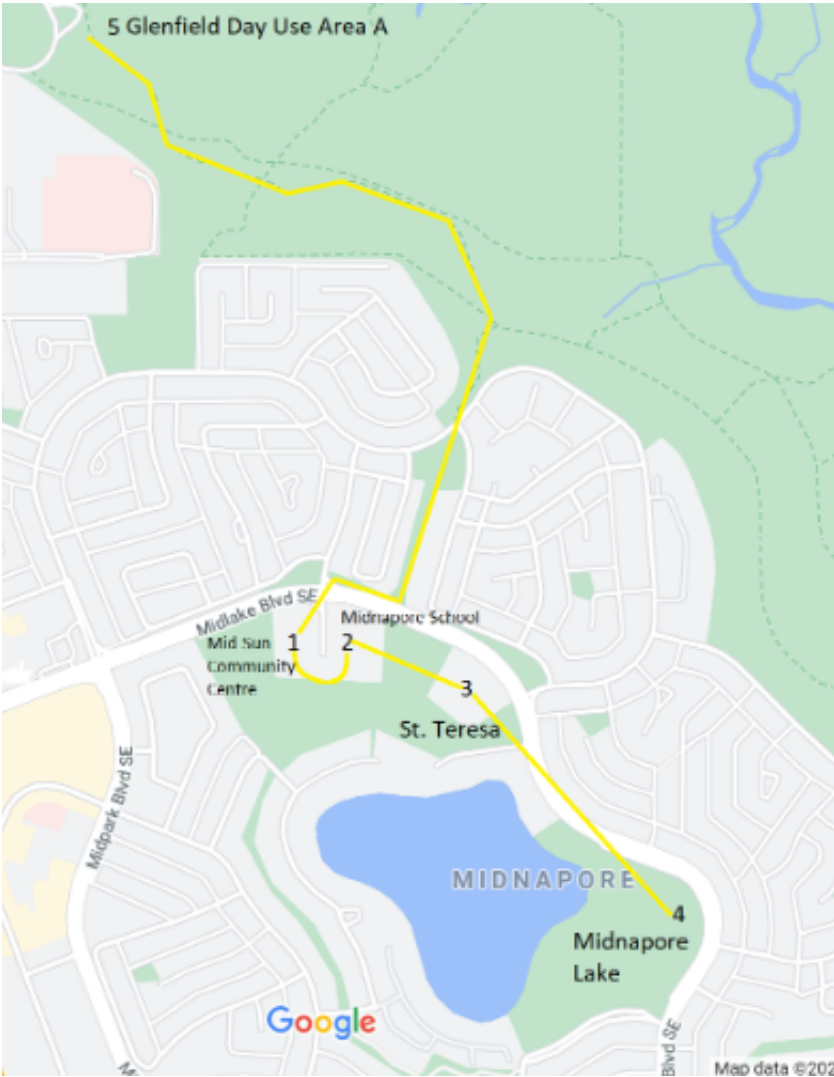
I hereby give permission for my child, _____ to participate in the Mid-Sun Community Child Care Programs' Community Excursions.

Child's full name

By providing this consent, I agree to release Mid-Sun Community Child Care and the associated activity venues from liability for any illness, injury, incident, or accident that may occur during these activities.

* Parent/ Legal Guardian Printed Name	* Parent/ Legal Guardian Signature	* Date
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COMMUNITY EXCURSION MAP



1. **Mid- Sun Community Center** (50 Midpark Rise SE)
2. **Midnapore School /CBE Midnapore School Playground-** 55 Midpark Rise SE, ~2 minute walk (walk around parking lot)
3. **CCSD St Teresa of Calcutta Playground-** 121 Midlake Blvd, 500m, ~3 minute walk (walk through field)
4. **Midnapore Lake-** 185 Midlake Blvd SE, 700m, ~10 minute walk. (walk through the field or along Midlake Blvd)
5. **Fish Creek Provincial Park, Glennfield Day Use Area-** 14428 Bannister Rd, SE, 1.9km, ~25 minute walk



**MID-SUN COMMUNITY CHILD CARE
ACKNOWLEDGMENT OF READING PARENT HANDBOOK,
POLICIES AND PROCEDURES**

I acknowledge that I have read and fully understand the Mid-Sun Community Child Care Policies and Procedures as outlined in the Mid-Sun Community Child Care Parent Handbook. Furthermore, I agree to adhere to the following policies and procedures:

POLICIES AND PROCEDURES	*Initial
Hours of Operation & Closure Dates- I understand that the Licensed OOSC programs run from September to June; registration for subsequent years must be completed on a yearly basis and is not guaranteed.	
Program Fees, Payment, Subsidy and Tax Receipt Information	
Absence from School/Program- I understand that it is my responsibility to notify the Program when my child will not be attending the Out of School Care.	
Termination Policy	
Inclusion and Diversity Policy	
Communication Policy; Confidentiality Policy; Complaint Policy	
Volunteer Policy	
Child Guidance and Bullying and Harassment Policies	
Off-Site Excursion Policy/Community Excursions, Safety	
Supervision Policy- Pick up/ drop off from schools	
Health and Safety Policy- Potential Health Risk, Administration of Medication, Nutrition	
Programming Policy	
Emergency Evacuation Policy	


* Parent/ Legal Guardian Printed Name

* Parent/ Legal Guardian Signature

* Date

Would you like to receive occasional updates from Mid-Sun Community Association by E-Mail?
(You will receive updates in regards to registration dates, community events, community news, etc...)

YES NO

 MID-SUN COMMUNITY CHILD CARE PARENT FEE AGREEMENT		* Parent Initial
The monthly fee of \$ _____ is due on the 1 st of each month and will be automatically processed.		
PAYMENTS		
Payment Method: Credit Card on ActiveNet Account <input type="checkbox"/> Subsidy-confirmation must be provided <ul style="list-style-type: none"> • A credit card is required to be on file to complete registration, even if on subsidy. • Receipts- the system generates receipts on a monthly basis rather than for the full year located on your ActiveNet account 		
MONTHLY FEES PER CHILD/ COMPONENT		
All fees include processing fee. **Fees are subject to change at any time		
Per Child Registration Fee- Recurring/Non-refundable/ Non-transferable	\$75 annually	
Before School Care - located at the Mid-Sun Community Center only. \$60.00 surcharge for all non-school days during the school year.	\$200	
Before and After School Care- Fees do not include Easter Break- per day surcharge applies.	\$625	
After School Care- Fees do not include Easter Break- per day surcharge applies. \$60.00 surcharge for all non-school days during the school year.	\$475	
Component Drop In Fee	\$20	
No-Show Fee- It is the parent/legal guardian's responsibility to notify the Program when their child will not be attending.	\$20	
Late Pick Up Fee- To be paid in cash to the staff at pick up. If for some reason you are unable to pick up your child by 6pm, please notify the Program. In these circumstances, alternative arrangements should be made.	\$1/ min	
Failed Credit Card Charges	\$25	
FEE AGREEMENT		
We require a minimum of one month's written notice for any withdrawal or change in program components. All scheduled changes will take effect on the 1st of the following month. Fees will not be pro-rated if terminated mid-month.		
If you do not notify the Program before August 1st that your child will not return in September, you will be charged for September fees.		
If you are a joint-parenting family, you must inform the Program of any fee splitting arrangements. Both parents/legal guardians must complete and sign a fee payment form.		
Please note that we do not pro-rate monthly fees for holidays, sick days, or other absences. Similarly, fees will not be pro-rated for program closures due to strikes, natural disasters, power outages, pandemics, or any other unforeseen circumstances.		
Families with overdue accounts will receive a 5-day notice to settle outstanding balances. Failure to do so will result in termination of childcare services, and securing alternate care will be the family's responsibility.		

It is the responsibility of the parent to update payment information on their account. Please go onto your [ActiveNet](#) account to access receipts and update your personal information (including credit card information).



If at any time you have concerns or questions regarding your fees, please contact the Program Director/ Manager as soon as possible.

* Parent/ Legal Guardian Printed Name

* Parent/ Legal Guardian Signature

* Date

Program Representatives Printed Name

Program Representatives Signature

Date