



## **PA Day Procedures for Application and Admission**

100 Old Orchard Grove – 647-297-3482 – info@childrensforest.ca

### **Application with Payment**

- For Program Admission, each completed Application for Enrollment form must be completed, signed, and accompanied by payment, in accordance with the hourly rate
- Once payments are deposited, they are non-refundable and non-transferable
- Payments are payable to Children's Forest
- Fees are tax deductible, receipts issued

### **Programs**

- Healthy snacks and lunch included in programs longer than 5 hours

### **Acceptance**

- Upon receipt of your completed Application and payment, you will receive Confirmation of Acceptance in the form of email

### **Deadline for Application**

- All complete Applications are processed as they are received; on a first come first serve bases
- If an Application is received incomplete, it will not be processed

### **School Days and Hours**

- Hours between 8:00am-4:00pm

### **Facility**

- Two large gymnasiums
- Four fully equipped classrooms
- Two high efficiency kitchens
- Enclosed outdoor space

# Children's forest

## Application for PA DAY Program

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

Male \_\_\_\_\_ Female \_\_\_\_\_ Birth Date: \_\_\_\_\_

Children's Address: \_\_\_\_\_

Parent 1 Name: \_\_\_\_\_

Parent 2 Name: \_\_\_\_\_

Most used phone number: \_\_\_\_\_

Second most used number: \_\_\_\_\_

Family Email: \_\_\_\_\_

Physician's name \_\_\_\_\_ Number \_\_\_\_\_

Child's Health Card No. \_\_\_\_\_

Child's Medication? \_\_\_\_\_

Child's Allergies?  
\_\_\_\_\_

Does your child have an EpiPen? \_\_\_\_\_

Special instructions regarding diet, rest, exercise (ex. dietary restrictions):  
\_\_\_\_\_

Please list person(s) authorized to pick-up child:  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** *circle one*

October 5 – November 16 – December 7 – January 18 – February 15 – June 7 – June 28

**Hours:** \_\_\_\_\_ (between 8:00am – 4:00pm)

**Price: \$16/hour payable by cheque or cash to Children's Forest**

I hereby make application for the enrollment of the following child in the Children's Forest PA Day. I agree to abide by all the terms and conditions outlined in the Children's Forest's Program Procedures for Application and Admission and by the rules and regulations of the Centre and the resolutions and by-laws as outline in the Policies and Procedures and Parent Handbook. Children's Forest is a community-based Learning Enrichment facility licensed by the Ministry of Education.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_