

Registration information

Child's full name: _____ DOB Y/M/D: _____

What name does he/she liked to be called: _____

Medicare # _____ Exp: _____

Mother's full name: _____ Phone: _____

Mother's email: _____

Father's full name: _____ Phone: _____

Father's email: _____

Complete address: _____

RL-24 Tax Receipt

Name of the person who will receive the RL-24: _____

S.I.N. _____

Person to be contacted in case of emergency (if both parents cannot be reached)

Name: _____ Relationship: _____

Phone: _____

Child's Pediatrician:
Name: _____ Phone: _____

Does your child have any health, physical, or emotional issues that we should be aware of?
(ie: speech, hearing, asthma, ADD, etc) so that we can discuss together the best course of action?

NO _____ YES _____

If yes, please clarify: _____

Please indicate any allergies your child may have : _____

Epipen: ☐ Yes ☐ No

Registration/parental agreement form **both pages must be signed.

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Child's full name: _____

DOB Y/M/D: _____

Programs Options (Select one)

Morning Program 8:30-12:30

M-T-W-TH
\$345 / month

☐

Extended Program 8:30-2:00

M-T-W-TH
\$435 / month

☐

Payment Options (Select one)

Option 1:

10 postdated cheques. August 1st-May 1st.
1 e-transfer \$85 non-refundable at the time of
registration: info@magiccirclepreschool.com

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Option 2:

2 e-transfers, on August 1st & December 15th
1 e-transfer, \$85 non-refundable at the time of
registration: info@magiccirclepreschool.com
\$1725 morning program per etransfer
\$2175 extended program per etransfer

☐

NB: A price increase of maximum 8% is possible if costs (ie rent) are increased.

Notice of withdrawal must be made in writing at least one month in advance to receive reimbursement for that month.

*For a withdrawal from the Magic Circle Program before school begins, please consider doing so by July 15th to allow another child to join preschool. Holding on to a spot can result in another child being left behind.

In the event of injury while in the control or custody of Magic Circle, we waive all claims against Magic Circle Preschool in excess of public liability insurance carried by Magic Circle Preschool.

We will comply with the COVID-19 Protocols in place at Magic Circle as per the Quebec department of health.

Magic Circle Preschool has a "Duty Parent Program". This means that each day of preschool, a different parent will spend the day with us on a rotational basis. For every child, one parent (or grandparent) must participate. To be in the class, you must be "Adequately Protected" (Green Status/Fully Vaccinated) as per the Quebec Vaxicode App. Please send us a screen shot of your green status screen to info@magiccirclepreschool.com

Indicate the name of the parent(s) that is
fully vaccinated and will do the duty days. _____

(Signature of parent or Guardian)

YYYY / MM / DD