

**THE LITTLE YEARS SCHOOL INC.  
APPLICATION FOR ENROLLMENT  
2024 - 2025**

<b>Personal Information:</b>		
First Name of Child:	Last Name of Child:	Child's Date of Birth (D/M/Y): ___/___/___
Home Address:		Postal Code:
Email Address:		Gender:
Phone number that we may reach a parent, while your child is attending class:		
Parent/Guardian Name:		
Cell Phone:	Home Phone:	Work Phone:
Occupation:	Work Address:	Employer:
Parent/Guardian Name:		
Cell Phone:	Home Phone:	Work Phone:
Occupation:	Work Address:	Employer:
<b>SIBLINGS:</b>		
Name:		Age:
Name:		Age:
Name:		Age:
Family's Relationship to The Little Years School: Current Student/Family ___ Alumni/Former Student ___ New to School ___		
<b>Emergency Information:</b>		
Name of Pediatrician or Family Doctor:		Phone:
Allergies (require an *Epi-pen):		
Family Manitoba Health Reg. No.:	Other Medical Concerns:	
Child's Personal Health ID No.:		
Is the child's immunization program up to date? Yes ___ No ___		
Are there any legal or custody orders for this child? No ___ Yes ___ If yes, provide a copy of document		
<b>EMERGENCY CONTACT (someone other than the child's Parent/Guardian(s))</b>		
Name:		Address:
Home Phone:		Cell Phone:
Work Phone:		Relationship to Child:
My/our child _____ may be released from <b>The Little Years School Inc.</b> to the following people, Parent/Guardian(s) and: _____ _____		
If an emergency situation occurs involving your child while at our facility, that we believe requires medical attention, we must have your signed permission to call an ambulance or the nearest hospital to make the necessary arrangements. Signature of Parent /Guardian:		

**PLEASE DO NOT MAIL**

<b>Program Sessions and Rates:</b>		
On the dashed lines in the boxes, please indicate your 1 <sup>st</sup> , 2 <sup>nd</sup> , and 3 <sup>rd</sup> choice of class placement.		
<b>Two Day Program Options \$40/month</b>	<b>Three Day Program Options \$60/month</b>	<b>5 Day Program Option \$100/month</b>
Wed/Fri 8:45AM-11:15AM -----	Mon/Tues/Thurs 8:45AM-11:15AM -----	Mon/Tues/Wed/Thurs/Fri 1:00PM-3:30PM -----
Mon/Wed 9:00AM-11:30AM -----	Tues/Thurs/Fri 9:00AM-11:30AM -----	
Tues/Thurs 9:15AM-11:45AM -----	Mon/Wed/Fri 9:15AM-11:45AM -----	
Tues/Thurs 12:45PM-3:15PM -----	Tues/Wed/Thurs 12:45PM-3:15PM -----	

<b>Program Payments:</b>				
<b>This application must be accompanied by 5 cheques (follow the chart based on your first choice session). All cheques should be payable to The Little Years School Inc. The \$75 registration fee and half of the April 1 payment are non-refundable.</b>				
Cheque #	Date on Cheque	2 Classes/Week	3 Classes/Week	5 Classes/Week
1	The date you register	\$75.00	\$75.00	\$75.00
2	April 1 2024	\$80.00	\$120.00	\$200.00
3	September 1 2024	\$80.00	\$120.00	\$200.00
4	November 1 2024	\$120.00	\$180.00	\$300.00
5	February 1 2025	\$120.00	\$180.00	\$300.00

<ul style="list-style-type: none"> <li>- I agree that my assigned class time may not be my first choice.</li> <li>- I agree that the \$75 registration fee and half of the April 1 cheque are non-refundable, even if I choose to withdraw and give 4 weeks notice.</li> <li>- I agree to give 4 weeks advanced written notice by email to <a href="mailto:littleyearsschool@yahoo.ca">littleyearsschool@yahoo.ca</a> or forfeit one month's fee in lieu of notice if I choose to withdraw my child from the program.</li> <li>- I agree that if there are insufficient numbers of enrolment to sustain the nursery school program, then this form is null and void.</li> </ul>	
Signature of Parent or Guardian:	Date:
Print Name of Parent/Guardian:	
Signature of Staff/Board Member:	Date Received:
<b>Other Questions:</b>	
Would you be interested in serving on the Little Years School Board? Yes _____ No _____	
Do you have any Board experience?	
How did you hear about The Little Years School?	

**PLEASE DO NOT MAIL**

## What You Need to Know About Registering at The Little Years School

1. We run a 2.5 hour preschool program for children ages 3-5. We offer 2, 3, and 5 day morning and afternoon programs. Two day programs are \$40/month, three day programs are \$60/month, and five day programs are \$100/month. Each class enrolls a maximum of 10 children.
2. Our location: 20 Donnelly Street (in Ralph Maybank School).
3. Our phone number: 204-489-0303
4. You are welcome to contact the Director by email if you have questions: [littleyearsschool@yahoo.ca](mailto:littleyearsschool@yahoo.ca)
5. Current and Alumni families can register immediately. New families can register starting at the Open House on February 26, 2024. Classes are filled on a first come, first serve basis.
6. Registration forms cannot be mailed. They must be handed in person to a preschool staff member either at the Open House or at a pre-arranged time with the preschool Director. Registration forms are not valid until they are signed and date stamped by a staff member.
7. In order for a registration form to be accepted by a staff member, it must be fully filled out, signed, and five cheques must accompany the form. The first cheque (\$75 registration fee) and half of the second cheque are non-refundable if you choose to withdraw from the school after registering, even with 4 weeks notice. Please see the following chart for amounts and dates. All cheques should be made payable to The Little Years School Inc. Cash will not be accepted.

Cheque #	Date on Cheque	2 Classes/Week	3 Classes/Week	5 Classes/Week
1	The date you register	\$75.00	\$75.00	\$75.00
2	April 1 2024	\$80.00	\$120.00	\$200.00
3	September 1 2024	\$80.00	\$120.00	\$200.00
4	November 1 2024	\$120.00	\$180.00	\$300.00
5	February 1 2025	\$120.00	\$180.00	\$300.00

8. Your application will be considered for one of your three session preferences. You will be contacted by telephone by June to discuss the availability of your session preferences.
9. By the end of August, welcome letters are sent out to all registered families. In this letter, the child's teacher, classroom placement, and session time will be clearly outlined.
10. If you would like to add your child to the waitlist for a full class, please call 204-489-0303 and ask to speak to the Director. The Director will add your child to the class waitlist and contact you if an opening becomes available.
11. Thank you for choosing The Little Years School – we look forward to seeing you in class soon!

**PLEASE DO NOT MAIL**