

Emmanuel After School Request Form 2021-22

FOR CHILDREN KINDERGARTEN - GRADE 5

Child's Full Name: _____

Parent/Guardian Name: _____

Phone: _____ - _____ - _____

Email: _____

Parent/Guardian Name: _____

Phone: _____ - _____ - _____

Email: _____

Address: _____

Postal Code: _____

School Attending: _____

Teacher: _____

Grade: _____

Age: _____

Birth Date (mm/dd/year): _____

Start Date: _____

Check the type of care you require: Hours are: 2:40 – 5:30 pm except on P.D. Days or early dismissals.

After School Care 2:40 – 5:30 pm

Early Dismissals

Professional Development Days

School Vacation Care (One week: Spring Break)

Bus Pick up at Frank Hobbs Elementary School

Bus Pick up at Campus View Elementary School

Eligible for Affordable Child Care Benefit gov.bc.ca/affordablechildcarebenefit

Does a parent/guardian work or study at Uvic?

Does your child have siblings who attended or are attending Emmanuel Day Care or After School Care?

YES NO Year: _____ Name(s): _____

I understand by enrolling my child for the above weeks, I am responsible for the total cost of care. Please include \$100 Registration Fee along with this form. This fee will be credited to your first month's fees if you do not withdraw and is non-refundable unless we cannot offer you a space. Payments can be received via Interac e-transfer to preschool@emmanuelvictoria.ca (no password needed). **In message field write "After School Care Reg. Fee 2021-22".**

Parent's Signature: _____ Date: _____

Print Name: _____

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250-598-0573 | afterschool@emmanuelvictoria.ca