



Re-Registration Form: 2020/2021

Child's Name: _____ Birth Date: _____
 Grade (for year registering): _____ School: _____
 Parent(s) Name: _____
 Parents(s) Email: _____

Required documents to complete re-registration –
 Please contact our office if you have any questions.

- Annual Membership fee: \$25, non-refundable, payable at registration each year, **credited from waitlist fee if applicable. This fee will be automatically debited from your existing pre-authorized account on May 1st.**

Families applying for the BC Affordable Child Care Benefit please contact our office for fees and Provider Forms. Benefit plans must be in place prior to your registration or fees will be billed in full.

CURRENT REGISTRATION

Full-Time OR Specify Days if Part-Time _____

REQUESTED REGISTRATION

Full-Time OR Specify Days if Part-Time _____

OFFICE USE ONLY

M/F		
P/D		
DEP		
SEPT		
OCT		
NOV		
DEC		
JAN		
FEB		
MAR		
APR		
MAY		
JUN		
WB		
SB 1		
SB 2		
DEP		
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AUG		