



33 Edgevalley Circle NW  
P: 403-239-1322  
[www.edgemontpreschool.com](http://www.edgemontpreschool.com)

January 15, 2012

To all current families of the Edgemont Preschool:

Although it is hard to believe, we are gearing up for the September 2012/13 school year. Attached, please find a registration form for the upcoming school year. Please know that early registration is **ONLY** open for those families that are **currently** in the program. For example if you currently have a child in the 3-year-old program you will need to complete a registration form for the 4-year-old program. Another example would be if you currently have a child in the preschool 3 or 4-year-old program and have another child entering the preschool in the 3-year-old program a registration form would need to be completed for that child.

As a current member, you have priority placement in next year's classes. Please note that we must receive your completed registration form prior to January 27, 2012 to ensure your child a guaranteed spot in the preschool next year. A copy of the Current Member registration form is attached at the end of this letter. Hardcopies of the registration form are also available at the preschool.

If you know of anyone that may be interested in our program for next year, please note the following dates:

- **Thursday, February 2<sup>nd</sup>, 2012:** Registration forms will be available for non-members both at the preschool and on our website.
- **Thursday, February 2<sup>nd</sup>, 2012:** Preschool Open House (4:00 to 6:00 p.m.)
- **Wednesday, February 29<sup>th</sup>, 2012:** Registration deadline for all non-members. Note: If more applications come in than spots are available, a lottery will be held on March 7<sup>th</sup>, 2012 to fill spots in the following order: previous members, Edgemont residents, and out of community residents. All families will be notified after that meeting to confirm their status.
- **Wednesday, April 11<sup>th</sup>, 2012:** AGM & Volunteer Selection Night for 2012-13.

Please note that our preschool will be relocating to Mother Mary Greene School next year. A letter outlining the rationale for this move is also attached.

Hope to see you back next year!

Yours sincerely,

Chelanne Murphy,  
Chairperson, Edgemont Preschool Association

Attach.

# Edgemont Preschool Association

## Current Member Registration Form – 2012/13



**Early Registration Deadline (Current members ONLY):** Completed application form and the \$60 non-refundable registration fee due by **January 27<sup>th</sup>, 2012**

**Price:** Our fees are \$125/month for the 3-year-old program (Tues/Thurs), and \$165/month for the 4-year-old program (M/W/F). Currently, morning classes are: 8:50am - 11:20am, and afternoon classes are: 12:40-3:10, however these times are subject to change based on the bell times at Edgemont School and Mother Mary Greene.

**Process:** Please note that current members have until January 27<sup>th</sup>, 2012 to secure their spot for next year. Any applications in before this time will have a guaranteed spot in next year's program. Should you miss this deadline, you will go into the regular lottery with the applications from non-members that come in by February 29<sup>th</sup>, 2012. A special registration board meeting will be held on March 7, 2012 to confirm the applications. Spots will be filled in the following order of priority: current members, previous members, Edgemont residents, and out of community residents. Should there be more applications than spots, a lottery will be held to fill the available spaces and the remaining names will be put on a waitlist. All applicants, including those that are waitlisted, will be contacted after that meeting to confirm their status. All successful registrants **MUST** attend the AGM and volunteer position selection meeting (without children), which will be held on Wednesday Apr.11<sup>th</sup>, 2012 at the Edgemont Community Centre.

**Age Requirement:** For the 3-year-old program, please note that your child must turn 3 by Dec. 31, 2012 (children with birthdays falling between Jan.1 and Feb. 28, 2012 may enter in January if space is available). For the 4-year-old program, children must turn 4 before February 28, 2013.

---

|   |  |
|---|--|
| Are you a current member at the preschool: (Y/N) _____                              | Class requested for upcoming year:<br>_____ 3 year a.m. _____ 4 year a.m.<br>_____ 3 year p.m. _____ 4 year p.m. |
| \$60 non-refundable cheque dated January 27, 2012 is attached: _____ (please check) |  |

### Child's Information

|                      |                                    |
|----------------------|------------------------------------|
| Last Name: _____     | First Name: _____                  |
| Date of Birth: _____ | Sex: M / F (circle) Phone #: _____ |
| Home Address: _____  | Postal Code: _____                 |

### Parent's Information

|   |   |
|---|---|
| Mother's Full Name (first/last)<br>_____                            | Father's Full Name (first/last)<br>_____                            |
| Home Address (street address & postal code)<br>_____<br>_____       | Home Address (street address & postal code)<br>_____<br>_____       |
| Daytime # _____ Evening # _____ Cell # _____                        | Daytime # _____ Evening # _____ Cell # _____                        |
| Primary e-mail address:<br>_____                                    | Primary e-mail address:<br>_____                                    |
| Work Address (company name & full street address)<br>_____<br>_____ | Work Address (company name & full street address)<br>_____<br>_____ |

**Local Emergency Contacts (MUST BE PERSONS OTHER THAN THE PARENTS)**

Name

Name

\_\_\_\_\_  
Address and Postal Code

\_\_\_\_\_  
Address and Postal Code

\_\_\_\_\_  
Daytime Phone Numbers

\_\_\_\_\_  
Daytime Phone Numbers

**Child's Health Record**

Child's Name

Alberta Health Care Number

\_\_\_\_\_  
Doctor's Name

\_\_\_\_\_  
Doctor's Phone Number

\_\_\_\_\_  
Doctor's Address (street address & postal code)

\_\_\_\_\_  
Allergies (INCLUDE ANY DIET ALLERGIES): \_\_\_\_\_

\_\_\_\_\_  
Previous serious illnesses (including dates) and any medications your child takes on a regular basis. If your child needs medication administered during school hours, you will need to complete an additional form on Orientation Night.

\_\_\_\_\_  
Any other special health concerns.

**Emergency Treatment Authorization/Volunteer Commitment**

I authorize the staff of Edgemont Preschool Association to take whatever measures are necessary to obtain emergency treatment for my child, should that be necessary, and understand that I would be billed for any costs.

I agree to take a volunteer job in the preschool, which I will attend to as required.

I will read through the bylaws (posted on the website at [www.edgemontpreschool.com](http://www.edgemontpreschool.com) , and on the bulletin board outside the classroom)

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_

**I wish my name, address, phone number and email to be placed on the class list to be distributed to my child's class members. Yes \_\_\_\_\_ No \_\_\_\_\_**

*For Office Use Only*

*Volunteer position:* \_\_\_\_\_