## TUXEDO COMMUNITY CENTRE PRE-SCHOOL REGISTRATION THREE-YEAR-OLD PROGRAM –TUESDAY & THURSDAY

Mornings: 9:15-11:15am

Please complete the	he following: (fundraising approach, student profile & medical authorizat	tion)
Child's Name		
Address		
Postal Code		
Phone Number		
E-mail		
Parent's Name		
Indicate preference f	e for morning or afternoon	
Are you a tuxedo res	esident? (circle)yes/no	
If yes, do you give p	permission to share email and receive information about community events a (circle) Yes //No	and activities.
COMPLETE & RE	RETURN THE ATTACHED STUDENT PROFILE & MEDICAL AUTHO	RIZATION
PLEASE NOTE:	Children must be 3 on or before December 31, 2024 The total cost for the 34 weeks is \$340.00	
<b>Enclose the followin</b>	ing payments:	
All postdated chequ	ques must accompany registration in order for space to be held	
Cheques payable to	o Tuxedo Community Center	
\$ 265.00 Program fe	able deposit with today's date fee dated September 7, 2024 ng dated September 15, 2024 (Fill in and return attached fundraising form)	
For refund policy vis	visit our website <u>www.tuxedocc.ca</u>	
274 Queenston St. (i Preschool closed Jur	ications may be given to any of the Pre-School teachers, or drop off at (in the mailbox, please). une 10 <sup>th</sup> -September 9 <sup>th</sup> form drop off at Queenston mailbox only ation please email <a href="mailto:preschool@tuxedocc.ca">preschool@tuxedocc.ca</a> or call 204-896-0959	

For Office Use Only:		
Child currently in TCC Pre-school: yes / no	Cheque #'s////	
Tuxedo / Non-Tuxedo Resident	Fundraising (Y)(N)Cheque #	Date
received:	Confirmation sent:	

## NOTE: Please complete this form and return it with your registration form and postdated cheques

Child's nameDate of Birth					
Preferred name to be used at school (if	different than above)				
*CIRCLE 1 <sup>ST</sup> TO CALL IN EMERGENCY	MOTHER	FATHER			
NAME					
HOME PHONE*					
CELL PHONE*					
BUSINESS PHONE*					
EMAIL					
HOME ADDRESS					
POSTAL CODE					
OCCUPATION					
MUST COMPLETE: PARENT/GUARDIAN LOCATION & CONTACT INFO WHILE CHILD ATTENDS PRESCHOOL i.e.: Stay at home, work etc.					
Emergency contact other than parents					
Emergency contact person's address					
Relationship	Phone				
Names of person permitted to pick up c	hild from school				
Does your child have any allergies?					
Does your child have any medical requ	uirements or need special accommodation	s? Yes/No			
If yes please describe					
Name of doctor	Phone	·			
Medical number: registration	personal				
Names and ages of siblings					
Names and types of pets					
Are there any custody or court order is	sues related to the care of your child?				
Photo/Video for classroom use: I give permission for photos and/or vid	leotaping of classroom activities for teach	er use only? Yes/No			
Social Media Consent: (see attached ex I give permission to occasionally post a p	•	their work on our social media platform page ?			
I give permission to distribute a class l	ist with my child's name, address, phone #	Yes/No and birth date? (circle) Yes /No			

Is there any other information about your child that you want the teachers to be aware of? (Use back if necessary)

## NOTE: Please complete this form and return it with your registration form and postdated cheques

Tuxedo Community Centre Preschool 368 Southport Blvd. Winnipeg, Mb R3P 0S9

#### Permission for Emergency Medical Transportation and Treatment

If, at any time, medical treatment is necessary due to a serious injury or sudden illness, I authorize the preschool to take whatever emergency measures deemed necessary for the protection of my child while in the care of the preschool facility. I give permission for my child to receive medical attention deemed necessary by my child's doctor or other medical personnel. I understand that this may involve transportation to the hospital in a private vehicle or ambulance. I understand that the preschool will make every attempt to contact me and that any expense incurred for such treatment, including ambulance fees, is my responsibility.

Date	Date	
Signature	Signature	
<u> </u>	_	
Parent Name (please print)	Parent Name (please print)	

## TUXEDO COMMUNITY CENTRE FUNDRAISING APPROACH

Dear Parents:

Welcome to the Tuxedo Community Centre Preschool. Your child will make new friends, have fun exploring everything our Preschool has to offer, and develop new skills. Thank you for joining our caring community.

If you are a returning family then you know how special our preschool is — lots of toys and choices for all ages of children, well designed crafts and wonderful teachers and a building that is well maintained and clean.

## HELP US TO KEEP THIS TRADITION GOING!

Most organizations find the need to supplement through additional fundraisers and our Preschool is no different.	
\$100.00 fundraising bond payable 'Tuxedo Community Centre' dated September 15, 2024 is attached.	
Please note: Fundraising bond is required PER REGISTERED CHILD in a program	
YOUR NAME	
CHILD(S) NAME /PROGRAM(S)	

Thank you for supporting our Preschool

**Tuxedo Preschool Parent Advisory Committee** 

# Social Media: Tuxedo Preschool 'A place to learn, play and grow.'



## Dear Parents and Guardians:

Tuxedo Preschool established a Facebook Instagram presence in 2015, to promote our Preschool to the surrounding community. We would like to continue to use this medium to occasionally highlight classroom events & themes throughout the year. We would like your permission to occasionally post a photo or video collection of your child and/or their work on our Facebook page.

## Our guidelines are as follows:

- We will not post names, although names may show on artwork
- Group photos or videos of children will not identify individuals by name
- Tagging will not be permitted

We look forward to sharing our preschool life with you in this manner.

Respectfully,

Liz Dryden Laura Speziali Christina Tompkins
Director Preschool Board Liaison Administrator