

General Registration

NOTE: Applications will be accepted on a first come first served basis.

Please ensure that you **complete** and **return ALL** of the following items:

- Application form
- One combined payment for Membership Fee and Tuition Deposit payable by:
 - cash
 - cheque (made out to REFENS)
 - e-transfer (treasurer@refens.com)

	Tuesday/Thursday	Monday/Wednesday/Friday
Total Tuition for 2024-2025	\$340.00	\$472.50
Due at Registration		
Non-Refundable Membership Fee	\$40.00	\$40.00
Non-Refundable 20% Tuition Deposit	\$34.00	\$47.25
Total due at registration	\$74.00	\$87.25
Payment Options: Due First Day of School September 2024		
1 Payment- Lump Sum	\$306.00	\$425.25
3 Payments September 1, December 1, March 1	\$102.00	\$141.75
9 Payments- September-May	\$34.00	\$47.25

General Registration event: Monday, March 4th at 6:30 PM in the Joseph Teres School library. As always, registration will take place on a first come, first served basis. The "RESERVE SPOT" button will be activated online on the REFENS website Sunday, March 3rd at 12:00 PM and deactivated on Monday, March 4th at 12:00 PM. Check the REFENS website on how to obtain your spot #. Please ensure that you have the registration package completed in its entirety before the General Registration Event on Monday, March 4, 2024. The non-refundable membership fee and non-refundable 20% tuition deposit are due at the registration event.

Members will be notified via EMAIL in August of important information regarding school start dates, supplies, etc.

Please forward any email/address/phone number changes to co-chair@refens.com.

Please visit our website at www.refens.com for updates and important information.

UPCOMING EVENTS:

REFENS Annual General Meeting: Mid-Late April (Date TBA) in the Joseph Teres School library. Please attend to get first-hand information regarding REFENS.

Nominations and voting for positions on the Board of Directors will also take place at this time. Please ensure you are present if you would like to be considered for one of these positions.

RIVER EAST FRENCH EXPOSURE NURSERY SCHOOL

General - APPLICATION FORM 2024/2025

(PLEASE PRINT)

CHILD'S INFORMATION

NAME _____
(SURNAME) (FIRST NAME) (MIDDLE NAME)

ADDRESS _____ POSTAL CODE _____

HOME PHONE# _____ DATE OF BIRTH _____
(MM/DD/YYYY)

EMAIL ADDRESS(ES) _____
(for communication with REFENS Board of Directors and Teacher)

Sessions: (please number your preferences)

** Tues/Thurs PM Class subject to change based on enrollment

- | | |
|--|--|
| <input type="checkbox"/> 3 YEAR OLD 9:15-11:35 TUES/THURS | <input type="checkbox"/> 4 YEAR OLD 9:15-11:35 MON/WED/FRI |
| <input type="checkbox"/> 3 YEAR OLD 1:00-3:20 TUES/THURS** | <input type="checkbox"/> 4 YEAR OLD 1:00-3:20 MON/WED/FRI |

FAMILY DOCTOR: NAME _____ PHONE NUMBER: _____

MEDICAL NUMBER: FAMILY _____ INDIVIDUAL _____

ANY ALLERGIES? **YES NO** IF YES, PLEASE SPECIFY _____

PHYSICAL OR EMOTIONAL NEEDS: (PLEASE BE SPECIFIC) _____

PREVIOUS NURSERY SCHOOL EXPERIENCE: _____

PARENT/GUARDIAN INFORMATION:

	PARENT/GUARDIAN 1	PARENT/GUARDIAN 2
FIRST AND LAST NAME		
RELATIONSHIP TO CHILD		
CELL PHONE #		
WORK PHONE #		
EMPLOYER NAME		
EMPLOYER ADDRESS		
EMPLOYER POSTAL CODE		

EMERGENCY CONTACT: (IF PARENT IS UNAVAILABLE)

NAME _____ RELATIONSHIP TO CHILD _____

HOME ADDRESS _____ HOME PHONE # _____

WORK ADDRESS _____ WORK/CELL PH # _____

PICK UP INFORMATION

OUR FAMILY PASSWORD IS: _____

IN ADDITION TO ABOVE NAMED PARENTS, THESE INDIVIDUALS CAN PICK-UP OUR CHILD:

Name Relationship to child Phone #

Name Relationship to child Phone #

Name Relationship to child Phone #

SHOULD WE BE AWARE OF ANY LEGAL CUSTODY ARRANGEMENTS? **YES** **NO**

ADDITIONAL INFO:

Do you have any special talents, skills, or connections that could benefit our nursery school?

Are you interested on becoming more involved with the River East French Exposure Nursery School?

Board of Directors: Yes No Paid- After Class Teachers Assistant? Yes No

If yes, name of interest parent/guardian: _____

RIVER EAST FRENCH EXPOSURE NURSERY SCHOOL PARENT/GUARDIAN AGREEMENT

Please sign to indicate your agreement with the statements below.

- Upon becoming a member, I agree to be bound to and abide by the policies of the co-operative as stated in the Parent Handbook. Please initial here to confirm that the Parent Handbook has been read. _____
- I have read the application form and enclose one current cheque to cover the Membership Fee of \$40.00 and the Annual Tuition Deposit.
- I understand that the post-dated cheques covering the balance of the tuition are due on the *FIRST DAY OF SCHOOL*.
- I give permission for my child to take part in activities and outings planned and supervised by REFENS staff.
- Should an accident, loss, damage, or theft of any belongings occur, I release the River East French Exposure Nursery School Co-op from any liability.
- I give permission to the REFENS staff to seek any required medical treatment for my child in an emergency if a parent/guardian cannot be reached.
- I agree to participate in fundraising initiated by the REFENS Board of Directors.
- I understand that, should I withdraw my child BEFORE January 31st, the post-dated cheques not yet due will be returned. If I withdraw my child AFTER January 31st, February to May cheques are NON-REFUNDABLE. The Membership Fee and Tuition Deposit are NON-REFUNDABLE.
- I understand that a Withdrawal Form is mandatory when withdrawing my child from the program.
- Should REFENS deem it necessary to terminate the stay of any child or parent/guardian in the program then the post-dated cheques not yet due will be returned; however, the Membership Fee and the Tuition Deposit are NON-REFUNDABLE.

I have read and signed the Personal Information Consent Form.

(For alumni: There is already one on file for _____)
Sibling's/Child's name

Parent/Guardian signature

Witness Signature

Date

Date