



**THE  
SUNFLOWER  
SCHOOL**  
inspiring young minds



FOR INTERNAL USE ONLY

Name \_\_\_\_\_

Start Date \_\_\_\_\_

Inf Tod Pre Kind SA

- Registration Fee
- Auto Withdrawal Form
- Immunization Card Copied
- Public Health Immunization Data Sheet
- Emergency Card
- Application Form Complete
- Visit Days \_\_\_\_\_

- Schedule \_\_\_\_\_
- Door Code
- Photo
- Hi Mama/Remind
- Quick Books

## ENROLMENT APPLICATION

The Sunflower School is a magical place of relationships and interactions that weave parents, children and educators into a culture of learning and loving.

The Sunflower School  
Lord Dufferin  
32 First Street, M1  
Orangeville, Ontario  
L9W 2E1

519-307-7500

The Sunflower School  
Townline  
9 Townline  
Orangeville, Ontario  
L9W 3R4

519-938-5147

# THE HUNDRED LANGUAGES OF CHILDREN

No way.  
The hundred is there.  
The child is made of one hundred.  
The child has a hundred languages  
a hundred hands  
a hundred thoughts  
a hundred ways of thinking  
of playing, of speaking.  
a hundred, always a hundred  
ways of listening  
of marveling, of loving  
a hundred joys  
for singing and understanding  
a hundred worlds to discover  
a hundred worlds to invent  
a hundred worlds to dream.  
The child has a hundred languages  
(and a hundred hundred hundred more)  
but they steal ninety-nine.  
The school and the culture  
separate the head from the body.  
They tell the child to think without hands  
to do without head  
to listen and not to speak  
to understand without joy  
to love and to marvel  
only at Easter and Christmas.  
They tell the child  
to discover the world already there  
and of the hundred  
they steal ninety-nine.  
They tell the child  
that work and play  
reality and fantasy  
science and imagination  
sky and earth  
reason and dream  
are things  
that do not belong together.  
And thus they tell the child  
that the hundred is not there.  
The child says  
“No way – The hundred is there.”

Loris Malaguzzi

# ENROLMENT APPLICATION



Full Name of Child			Date					
Date of Birth			Preferred First Name					
Home Phone Number			Age as of Today					
Program			Requested Enrolment Date *					
Schedule	Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>	Select Days Applicable	M <input type="checkbox"/>	T <input type="checkbox"/>	W <input type="checkbox"/>	T <input type="checkbox"/>	F <input type="checkbox"/>
Address								
City			Postal Code					

\* We do our best to accommodate your requested enrolment dates, but it is not set in stone until you receive confirmation from us. Sometimes we may not know until 4-6 weeks in advance whether a spot is available.

What do you want from The Sunflower School experience for your child?

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## YOUR CHILD'S FAMILY

If you are separated or divorced, please indicate with whom the child is living. If there is a custody and/or access issue, legal documents must accompany these forms

Who does the child live with? (please check one)

Both Parents       One Parent: (Name) \_\_\_\_\_

### Parent Information

Full Name of Parent			Home Phone Number		
Cell Phone Number			Home Email Address		
Home Address					
City			Postal Code		
Occupation			Employer's Name		
Work Phone			Work Email		
Work Address					
City			Postal Code		

Full Name of Parent		Home Phone Number	
Cell Phone Number		Home Email Address	
Home Address			
City		Postal Code	
Occupation		Employer's Name	
Work Phone		Work Email	
Work Address			
City		Postal Code	

### Brothers & Sisters

Name		Age	
Name		Age	
Name		Age	

### Other Family Members Living in Your Home with Your Child

Name		Relationship	
Name		Relationship	
Name		Relationship	

## HEALTH & MEDICAL INFORMATION

Please indicate if your child experiences or has experienced any of the following:

	Allergies		Unknown	Epi Pen Required	
Nuts	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other Foods	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Latex	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Bee Stings	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Medication	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If other, please specify:					
Other Dietary Restrictions:					
Behaviour Issues	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:		
ADHD	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:		
Seizures	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:		
Vision/Hearing Difficulties	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:		
Mobility Difficulties	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:		
Asthma	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:		
Diabetes	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:		
Is your child currently or has been supported by an outside agency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Details:		
Family Doctor			Telephone Number		
Address					
City			Postal Code		

## History of Communicable Diseases

Disease	Date	Disease	Date
Red Measles		Chicken Pox	
German Measles		Mumps	
Scarlet Fever		Whooping Cough	
Other:		Other:	

## General

Is there anything else we should be aware of regarding your child's health or medical history? Does your child have now (or has your child ever had) any medical problems of which we should be aware?

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## Other Dietary Restrictions

Specific List is Required

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# EMERGENCY CONTACTS

Every effort will be made to contact you in the event of an emergency; however, these people will be contacted if we cannot reach you. Please make sure your child is familiar with your emergency contact person

## Emergency Contact #1

Full Name		Relationship	
Cell Phone Number		Home Phone Number	
Home Address			
City		Postal Code	

## Emergency Contact #2

Full Name		Relationship	
Cell Phone Number		Home Phone Number	
Home Address			
City		Postal Code	

## Who Else is Authorized to Drop Off & Pick Up Your Child?

Name		Relationship		Phone #	
Name		Relationship		Phone #	
Name		Relationship		Phone #	
Name		Relationship		Phone #	

## REST OR EXERCISE RESTRICTIONS

I have the following exercise restrictions for my child:

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Parent Signature	Date

## INTERNAL PHOTOGRAPHY PERMISSION

I give my permission for my child to be photographed as part of the curriculum at The Sunflower School. All photos are for internal use only. If a photo is to be placed on the school's website, parent permission will be asked.

YES       NO

Parent Signature	Date

## SOCIAL MEDIA PHOTOGRAPHY PERMISSION

We do have an Instagram account for the school, photos are only placed on there if you feel comfortable. Only the parents of the current children enrolled have access to that page to view photos

YES       NO

Parent Signature	Date

## SOCIAL MEDIA POLICY

I acknowledge that photos and videos posted of my child on the HiMama app are property of The Sunflower School. I am not permitted to share any of the photos or videos on my personal social media accounts if the photo or video includes another child with them. The identity of another child must remain confidential at all times.

YES       NO

Parent Signature	Date

## SUNSCREEN PERMISSION

I give permission to The Sunflower School to apply sunscreen on my child *OR* I have supplied The Sunflower School with sunscreen to be applied to my child.

Name of Sunscreen: \_\_\_\_\_

Parent Signature	Date

## COMMUNITY WALK PERMISSION

I give permission for my child to be taken on community walks. Every precaution and safety measures are in place when we go on community walks.

Parent Signature	Date

## GUIDING CHILDREN & BEHAVIOUR

The purpose of our school and our team is to provide a warm and caring environment in which each child can play, learn and grow. Keeping in mind the development of the children, consistent limits have been set. These reflect concerns about issues of health and safety, appropriate use of toys and equipment, and respecting the rights of each child as an individual. Children respond best to positive direction, encouraging language and tone of voice. We believe a child learns respect by being given respect. Our child guidance policies reflect these beliefs. The following methods will be used as appropriate to individual situations:

- Redirection-guiding a child towards an acceptable option when engaged in an unacceptable activity
- Natural and logical consequences
- Limit setting-boundaries are developed by the team for the children as a group or for individual children, according to specific situations
- Modeling appropriate behavior
- Offering and encouraging choices
- Anticipating conflict and planning an appropriate program environment
- Positive reinforcement and encouragement

Under no circumstances will children be harmed physically or emotionally by a staff member. Contravention of this policy by staff would be dealt with under terms of employment. Also, parents, students and other adults are required to maintain this same policy while they are on the premises of The Sunflower School.

### Right of Exclusion Policy

The Sunflower School reserves the right to exclude any child for whom the program offered by the school is deemed inappropriate in meeting the developmental, social or behavioral needs for the child within our group setting. Any decision regarding a child's continuance in the school will be reviewed by the Director in consultation with the Early Childhood Educator. Consultation with the parent will also take place. If parents are asked to withdraw their child, two weeks' notice will be given.

Parent Signature	Date

In the face of imminent danger to children, staff or anyone else, the school reserves the right to terminate without notice but will provide compensation for the required two week notice period. Excessive biting of more than three incidents is determined as a danger to our children.

If problems between the school personnel and parents arise and these problems affect the efficiency of the school, the situation will be discussed with the Director and parents. The solutions arrived at during this discussion will be final. It is assumed that all feasible solutions will be considered in an attempt to resolve the problem. However, in extreme cases it could include asking those parents to withdraw their child from the school.

## Payment

I understand that my fees are to be paid in full every month. Please see Fee Policy section in the Parent Handbook.

YES       NO

Parent Signature	Date

## PARENT/GUARDIAN SIGNATURES

I understand that if the Upper Grand School Board is closed due to extreme weather then so is The Sunflower School

I understand that The Sunflower School is closed at 5 pm on long weekends

I understand that The Sunflower School is closed on Thursday and Friday before Labour Day for repairs and maintenance and professional development for the teachers

**Failure to disclose any and all information requested on our enrolment form will automatically void your child's admission to the Sunflower School. The Sunflower School's open admission and hiring policies does not discriminate on the basis of race, sex, ethnicity, or similar factors.**

Parent Signature	Date
Parent Signature	Date

### FOR INTERNAL USE ONLY

<b>Date of Enrolment</b>		<b>Date of Withdrawal</b>	
<b>Program</b>	<b>Schedule</b>	<b>1<sup>st</sup> Scheduled Visit</b>	<b>2<sup>nd</sup> Scheduled Visit</b>

<b>Toddler Teachers Initials</b>	<b>Date</b>	<b>Pre-School Teachers Initials</b>	<b>Date</b>	<b>School Age Teachers Initials</b>	<b>Date</b>
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