

TLC Active Kids *Preschool*

Registration Form

Date: _____

Child's Name: _____ Age: _____

Parent's Name: _____ Day Phone No: _____

Please circle or highlight the class you would like to register in:

2025 - 2026 TLC Active Kids Preschool

3-4 Years	60300	Tu/Th	Sep 9-Jun 16	9:00-11:30 AM
	60301	Tu/Th	Sep 9-Jun 16	9:00-11:30 AM
4-5 Years	60302	M/W	Sep 8-Jun 15	9:00-11:30 AM
	60303	Tu/Th	Sep 9-Jun 16	12:15-2:45 PM

Must Provide:

- Registration Package
- \$180 Deposit
- Credit Card Authorization Form

FOR OFFICE USE ONLY

Date received: _____

YES Wellness Pass added (Please Circle)

Registration completed by: _____

Date of registration: _____

PARTICIPANT INFORMATION FORM

Child's name: _____

Date of birth (DD/MM/YY): _____ Age: _____

Address: _____

City: _____ Postal Code: _____

Guardian #1 name: _____

Email: _____ Contact number: _____

Guardian #2 name: _____

Email: _____ Contact number: _____

Emergency contact #1 (*Cannot be mom or dad*):

Name: _____ Relationship to child: _____

Contact number: _____

Emergency contact #2 (*Cannot be mom or dad*):

Name: _____ Relationship to child: _____

Contact number: _____

Is there anyone who is NOT legally authorized to pick up your child? Yes No
(If yes, please provide court documents).



MEDICAL INFORMATION

Is your child up-to-date with vaccinations? Yes No

Allergies:

Does your child have any food or other allergies? Please list.

Health Concerns:

Does your child have any illnesses, learning disabilities, behavioral issues or any other medical conditions? Please list.

Medication:

Is your child on any medications? Will your child be taking medication during the program? Please list.



TLC Active Kids *Preschool*

Photo Release:

The undersigned hereby grants the TransAlta Tri Leisure Centre, their legal representatives and assignments, the rights and permission to take and publish still photographs and moving videos of my child at the TransAlta Tri Leisure Centre. These pictures may be used in publications, audio visual presentations, promotional literature, and website or in any other manner for the purpose of displays and promotions.

Parent signature _____

Date _____

Medical Statement:

In case of emergency or illness, every effort will be made to contact the parent/guardian. In the event that contact cannot be made, I agree that in case of emergency or illness a qualified medical physician may attend to my child.

Parent signature _____

Date _____

Informed Consent:

I am aware that the TLC Active Kids Preschool program may be involved in some of the following activities: swimming, skating, sports, use of the TransAlta Tri Leisure Centre facilities, off site trips such as walking to local parks. I fully understand that reasonable precautions and safety measures will be taken by program staff.

Parent signature _____

Date _____

A LITTLE MORE ABOUT ME...

This participant information form helps us get to know your child better, as well as helps us to better plan our activities and programming.

Does your child have any fears?

How does your child communicate?

How does your child react to stressful situations?

Have you been to preschool before?

My child has _____ brothers and _____ sisters.

My child's favorite hobby is: _____

Other activities my child has done at the TransAlta Tri Leisure Centre:

The top three things I would like my child to learn this year are:

1. _____
2. _____
3. _____

Does your family belong to a specific culture at home? _____

Does your family share in any special traditions (religious or non-traditional)? _____

Please provide us with any other information about your child that may help us ease their transition into our program:

OFF-SITE ACTIVITY PERMISSION FORM (Re-Occurring)

I _____ authorize the TLC Preschool to take my child(ren) _____ to the following locations inside and outside the TransAlta Tri Leisure Centre building, as listed below. The TLC Preschool will not pass the boundaries of Jennifer Heil Way and Spruce Ridge Road without an additional Field Trip Permission Form, signed by each child's guardian with the specific details of the activity.

Outdoor Locations:

- Rotary Playscape
- Green space: East of the building

Indoor locations:

- North and/or South Field
- Gymnasium
- Swimming Pool
- North and/or South Arena and/or Leisurelce
- Play Centre

I understand that TLC Preschool using the above-mentioned indoor and outdoor locations might be spontaneous in nature. TLC Preschool will always be back inside the TransAlta Tri Leisure Centre for parent pick up, unless otherwise previously discussed.

TLC Preschool staff, while partaking in an off-site activity will walk the TLC preschool children to the activity space via a staff line leader with a staff following from the rear (Head/tail method). If contact is needed during any off-site activity, use Seesaw communications or call the Children and Youth Program Coordinator at 780-948-3214. TLC Preschool staff will conduct site checks of the activity spaces and head counts prior to and upon arrival to the activity spaces. Portable records containing emergency contacts, emergency medication information and first aid supplies will be carried out to any of the off-site activity spaces.

Parent signature _____ Date _____

TRI LEISURE CENTRE POLICY MANUAL | Child Guidance

TLC Preschool believes that every child should be given the opportunity to play and learn through positive classroom experiences. Staff understand and encourage learning through both trial and error, and look to create a supportive, safe environment for the children to grow.

TLC Preschool's Child Guidance Policy has two rules for the children to build skills in empathy and conflict resolution:

1. If anyone is hurt, either physically or emotionally, the child closest to them must stop playing, take care of and stay with that person until they are ready to re-join the activity.
2. If two children have an argument or disagreement during an activity, they both must stop the activity until their conflict is peacefully settled (with the help from an instructor if necessary).

Staff will support the children through difficult situations by:

- Helping them calm down before dealing with the conflict. Staff may offer a drink, sensory material, or quiet time to help the child release their stress and feel comfortable to discuss the conflict.
- Listening to their description of the conflict.
- Supporting them in the decision-making process and encouraging them to give possible solutions.
- Ensuring they feel heard and comfortable with the results.
- Providing positive reinforcement when they display the desired behavior.

Biting, kicking, hitting, scratching, or harming another child or staff member in any way will not be tolerated at the TLC Preschool. When a child is considered to be causing harm to themselves, another child or staff member, the incident will be documented, and the parents of the child will be informed. An action plan to move forward will be created and documented by the Instructor and the Children and Youth Program Coordinator. If the behavior continues with no improvement and poses a risk to the safety and well-being of other children or staff members, the parent may be asked by the Children and Youth Program Coordinator to withdraw the child from the TLC Preschool.

A staff member may not, under any circumstance:

- Inflict any form of physical punishment, verbal or physical degradation or emotional deprivation on a child.
- Deny or threaten to deny any necessity to a child.
- Use or permit the use of any form of physical restraint, confinement or isolation of a child.

I _____ have read and understand TLC Active Kids Preschool's Child Guidance policy.

Child's name: _____

Parent signature _____ Date _____

WITHDRAWAL POLICY

If you decide to withdraw your child from the program, the following portion of your \$180 deposit will be refunded based on the date we receive written notice.

Withdrawal date	Refund (% / \$\$)
Before August 25, 2025	100% / \$180.00
August 26-September 7, 2025	50% / \$90.00
September 8, 2025 -June 15, 2026	0% / \$0

If your child completes the program in its entirety without any incidentals to a monthly payment, the \$180 deposit will be refunded back on the account 2 weeks after the final monthly payment.

I _____ have read and understand the TLC Active Kids
Preschool Withdrawal Policy.

Parent Signature _____ Date: _____

THE SEESAW APP

Welcome to our online interactive classroom, SeeSaw. This multi-purpose app is a digital portfolio that gives you real-time experiences into your child's day and invites families to keep in the loop about their children's classroom. The app provides a clear and direct pathway of communication between home and school so that parents never miss a beat.

The Seesaw platform adheres to a strict privacy policy that promises not to share or withhold anything placed on the app (web.seesaw.me/privacy/) or share any content with third parties. To ensure information is safe within your classroom, each parent will have access to only their child's work. In using Seesaw, our teachers take pictures of your child periodically throughout the year and share those pictures privately to your family account on Seesaw. Any images of your child will only be shared with the child's parents and classroom. We ask families in the classroom not to share any photos outside the group to third parties.

Nothing gets families more engaged with the classroom than seeing and hearing what their child is doing at school. Our goal is to keep families in the loop and engaged in your classroom through personalized, easy to use, safe and visual updates.

We as TLC adhere to the following:

- Any students we add to your classroom are current students in your class.
- We will use Seesaw for classroom purposes and not TLC promotions unless individual permission and photo release form are signed.
- We will treat Seesaw as an extension of the classroom and take reasonable steps to confirm that students and parents are using Seesaw appropriately.
- We will take reasonable measures to protect access to information contained in student journals and class journals.
- We will only invite parents or guardians or other trusted adults to view student journals.
- We will protect your class QR code so that access to student journals and class journals is limited only to students and parents, guardians, and other trusted adults.

I consent to have myself as the parent, and my child, as listed below, to participate in Seesaw with full understanding of TLC Active Preschool's terms of use and expectations.

Child's Name: _____

Parent Printed Name: _____

Parent Signature: _____ Date: _____

TLC Active Kids *Preschool*

(TLC Preschool Payment Plan) PRE-AUTHORIZED MONTHLY AGREEMENT





Parent's Name: _____

Email: _____ Child's Name: _____

Home Phone No: _____ TLC Program Barcode: _____

PAYMENT AGREEMENT

This is a monthly installment payment plan, through which the TransAlta Tri Leisure Centre Preschool program registrants may make consecutive monthly payments for their program, rather than a single payment.

Please Check one		Card Number	Expiry	Exact Name on Card	Date	Signature
		Visa Debit not accepted				
						

Initial I/we authorize the TransAlta Tri Leisure Centre (TLC) to store the payment information on this agreement for the purpose of withdrawing an automatic payment from the noted credit card on the **SECOND WEDNESDAY** of each month in accordance with this agreement.

Initial I/we authorize the TransAlta Tri Leisure Centre to debit my/our Credit Card for the automatic debit monthly installment payment on the **SECOND WEDNESDAY** starting **October 8th, 2025 and ending July 8, 2026** as payment for the TLC Preschool program fee.

Initial I/we agree that in the event of a change of credit card or expiration date, I/we will notify the TLC in person at the Customer Experience Desk **BEFORE THE 25th OF THE MONTH PRIOR TO THE NEXT PAYMENT DATE.**

Initial I agree that if my Pre-Authorized automatic payment is declined, the unpaid payment will be due immediately, and the \$180 deposit fee will be taken. Non-payment could result in the termination of this agreement and related TLC program registration.

Initial I understand that **two consecutive missed payments** will result in the termination of this agreement. Full payment of outstanding program fees and administrative fees will be required to be paid in full within 15 days or the program participant will be removed from the program.

_____ APPLICANT NAME(s)	_____ APPLICANT SIGNATURE(s)	DATE: _____ DD /MM/ YYYY
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Rights of Dispute: You have the right to receive reimbursement for any debit that is not authorized or is not consistent with this agreement. In order to be reimbursed, the customer must complete a Declaration Form at their bank branch up to and including 90 calendar days after the date of which the debit in dispute was posted to the customer's account. The customer acknowledges that disputes after the above noted time limitations are matters to be resolved solely between the TransAlta Tri Leisure Centre and the customer.

(TLC Preschool Payment Plan) PRE-AUTHORIZED MONTHLY AGREEMENT