

FOR LUNCH PROGRAM USE ONLY

Student's Name _____

Teacher's Name _____

Room # _____

Full Time Part Time/Casual

ÉCOLE MARGARET UNDERHILL USER-PAY LUNCH SUPERVISION PROGRAM

Kindergarten

REGISTRATION FORM

2020/2021

CHILD'S NAME _____

Birth Date _____
mm/dd/yyyy

Address _____ Postal Code _____ Home Phone Number _____

MOTHER/GUARDIAN NAME _____ Employer _____

Day Time Phone Number _____ Cell _____ Email _____

FATHER/GUARDIAN NAME _____ Employer _____

Day Time Phone Number _____ Cell _____ Email _____

EMERGENCY CONTACT (Parents will be contacted first)

NAME _____ Relationship To Child _____

Address _____ Phone Number _____

SPECIAL INSTRUCTIONS FOR MY CHILD - i.e. allergies, medications, medical (medical alert bracelet for example)

Is there a sibling in the Lunch Program? ___ No ___ Yes Name _____ Grade _____

Please notify the Lunch Program, 204.958.6832, immediately of any changes to the above information.

REGISTRATION OPTIONS

Full time - the student will be eating lunch at school every day

Part-time - the student will be eating lunch at school on a less than full time basis

_____ **My child will participate in the lunch program on the following basis (please check one):**

_____ **Full time:** _____ **1 cheque** \$90.00 per child, dated for the first day of school, 2020; **OR**
 _____ **2 cheques** \$45.00 per child, dated for first the first day of school, 2020 and Feb. 20,
2021

_____ **Part time:** _____ **1 cheque** \$10.00 for 10 days- Attendance record punch card will be kept at school,
 parent will be notified by UPLSP staff should more days need to be purchased.

_____ **Casual:** **\$1.00** (exact change only) payable in cash to the UPLSP Coordinator on the day that the student is to
 stay for lunch.

N.B. Please purchase part time days carefully. Refer to section 1.09 Refunds. There are no refunds.

- 1. Please return a completed Registration Form for each child, along with the applicable payment to the School Office on **MONDAY SEPTEMBER 14, 2020**
- 2. Please make cheques payable to: **EMU UPLSP. Please place your payment in a sealed envelope with your family name on the outside.**

We ask that you please pay by cheque as we are not responsible for lost or stolen cash. Payment may be made by one (1) cheque for all children in one family. Individual cheques for each child are not required. Please note child's / children's names on the cheque to ensure payment is applied correctly to each student.

Late payment will result in removal from the Lunch Program.

ACKNOWLEDGEMENT

My child and I have gone over the attached Policies and Rules and we understand them. I understand that if they are not followed, my child may lose the privilege of participating in the Lunch Program.

_____ _____ _____
Date Parent/Guardian Name (please print) Parent/Guardian Signature

I understand the rules of the Lunch Program and I promise to follow them.

_____ _____
Child's Name (please print) Child's Signature

If you have any questions or concerns about the Lunch Program, please contact the École Margaret Underhill User-Pay Lunch Supervision Program Committee at 204.958.6832.