



## Oak Learners Program Enrolment & Registration 2017-2018

### Registering for (select programs and terms):

Programs	Terms	Programs	Terms
<input type="checkbox"/> Private Music Lessons Day / Time:		<input type="checkbox"/> Mindfulness Program:	
<input type="checkbox"/> Other Music Class:		<input type="checkbox"/> Yoga / Movement Class:	
<input type="checkbox"/> Private Tutoring Day / Time:		<input type="checkbox"/> Bridge the Gap Day(s):	
<input type="checkbox"/> Academic Programs		<input type="checkbox"/> Other: (ie. Camps, Kindergarten Readiness, Enrichment, etc.)	

### Participant Information

Participant's Full Name	Date of Birth	M   F Sex
Email	Home Phone	Cell Phone
Address	City, Province, Postal code	

### Parent Contact Information *(For Participants Under 18)*

Parent's/Guardian's Name	Parent's/Guardian's Name
Email	Email
Home Phone	Cell Phone
Home Phone	Cell Phone

### Alternative Emergency Contacts *(if needed)*

Primary Emergency Contact	Secondary Emergency Contact
Home Phone	Cell Phone
Home Phone	Cell Phone



Medical / Health Information

Allergies/ Known Health Considerations

Treatment (*ie. Epi Pen*)

Medications

Yes?  No?  (Explain)

Health Card Number

Immunizations Up to Date?

Family Doctor's Name

Phone Number

I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached in the case of an emergency.

Parent's/Guardian's Signature

Date

Registration Agreement

I have read, understand and agree to the terms of registration and enrolment in programs at Oak Learners. I have read the Parent Handbook and agree to all policies and procedures applicable to the programs for which I am enrolled at Oak Learners.

Parent's/Guardian's Signature

Date



## Payment, Policy, Terms and Consent

Participant Full Name: \_\_\_\_\_

*Please initial all sections to verify that you have read and agree to our terms of registration.*

### Registration & Payment

The terms covered by the registration agreement will be considered in effect upon Oak Learners receiving payment or payment information for the holding of a class placement. Informing a representative of Oak Learners of intent to re-register without complete registration and payment will not hold a student's placement. Full payment must be received at the time of registration. A \$25.00 NSF fee is applied to a student account for each NSF cheque or declined payment.

Initials:

### Missed Lessons or Cancellations

If you will be missing a lesson, please call or email our office as soon as possible to notify us of your absence. Private lessons cancelled by the student can be made up provided that a minimum of 24 hours notice is received by the instructor and the cancellation is due to good cause (ie. illness, family vacation). Missed group classes are not eligible for make-up lessons or credits.

Missed group classes, Bridge the Gap, and semi-private lessons are not eligible for make-up lessons or credits.

Make-up classes are available for private lessons only (music or tutoring). Make-up classes must be scheduled in the same term as the missed lesson. Oak Learners will not guarantee the availability of a specific instructor for make-up lessons.

Initials:

### Cancellations or Change of Instruction

Oak Learners reserves the right to withdraw any course, or to change an instructor of any lesson, or to close any location at anytime without notice or liability other than to refund tuition fees received for lessons cancelled due to such withdrawal or closing.

Initials:

### Termination

Registration in programs at Oak Learners are based on 8-week terms. If you wish to withdraw your registration mid-term, written notice for 3 consecutive lessons is required to process the withdrawal and refund, if applicable. Tuition is payable for the duration of the 3-lesson period whether lessons are attended or not.

Initials:

### Personal Property

Oak Learners does not assume any responsibility for personal property (including, but not limited to clothing, cameras, cell phones, purses, wallets, vehicles, etc.) lost, damaged or left unattended on school premises.

Initials:

### Photography Consent

For part of learning at our center, photographs will be taken to document our discoveries and experiences of the children. To protect the rights and privacy of the children in our programs, we need permission from the parent or legal guardian to take pictures of their child while attending programming by Oak Learners.

I give full permission for the staff at Oak Learners to take photographs of myself or my child while under the care at our programs. I also give permission for Oak Learners to use these pictures for promotional purposes outside the program premises.

Initials:

### Local Outings Consent

I give permission for my child to go on neighbourhood outings and field trips. I release Oak Learners and individuals from liability in case of accident during activities related to regular programming, provided normal safety procedures have been taken.

Initials:



## Oak Learners Student Intake Questionnaire

Student Full Name	Date of Birth	M	F
Sex			
Parent(s) Names			
Email	Home Phone	Cell Phone	

### Goal Setting

What do you hope your child will achieve through enrolment at Oak Learners?

Goal 1:

Goal 2:

Other:

### Learners Profile

What are your child's areas of strength? (Academic, social/emotional, problem solving, physical, etc.)

What are your child's challenges? (Academic, social/emotional, problem solving, physical, etc.)

What does your child enjoy learning about on their own time?

What other extra-curricular activities in your child involved in?

What other professional services or academic support does your child receive?

Is there any other information you would like your child's teachers to be aware of?



## Oak Learners Parent Co-op Membership Registration

Parent Full Name	Date of Birth	M	F
		Sex	
Email	Home Phone	Cell Phone	

### Role Selection

	Selected Roles / Duties
<input type="checkbox"/> <b>Operational</b>	<input type="checkbox"/> administrative support <input type="checkbox"/> classroom assistance <input type="checkbox"/> Snack Prep <input type="checkbox"/> Shopping <input type="checkbox"/> Other: _____
<input type="checkbox"/> <b>Fundraising</b>	<input type="checkbox"/> Assist in Fundraising Efforts <input type="checkbox"/> Organize Fundraising Events
<input type="checkbox"/> <b>Marketing</b>	<input type="checkbox"/> Represent at local events <input type="checkbox"/> Distribute marketing material locally <input type="checkbox"/> Assist with creation/printing of marketing materials
<input type="checkbox"/> <b>Clean-Up</b>	<input type="checkbox"/> Interior Cleaning <input type="checkbox"/> Exterior / Yard Clean-up <input type="checkbox"/> General Maintenance

**Details** (to be completed by Oak Learners administration):

### Registration Agreement

I agree to complete a minimum of 8 hours per month towards the above role and duties as assigned by the Oak Learners administration. I agree to attend all 4 General Meetings. I have read the Parent Handbook and agree to abide by all policies and procedures at Oak Learners.

Signature

Date