



# Christ Church Cathedral Childcare & Junior Kindergarten

1670 Richardson Street  
Victoria, British Columbia  
V8S 1R4

Telephone (250) 383-5132  
Facsimile (250) 383-5188  
jk@cathedralschool.ca

## APPLICATION PACKAGE

### PHILOSOPHY

Our philosophy is learning through play and experience. Our child-centered daily program includes activities and experiences that encourage each child to learn through play, developing social, emotional, physical, and intellectual skills, while expanding their knowledge of the world around us. We provide opportunities to learn about Anglican faith, encounter and learn to handle feelings appropriately, develop satisfying relationships and, most of all, have fun!

### ADMISSIONS POLICY

Should your family be offered a childcare space, there is a \$100.00 non-refundable deposit, payable by cheque to Christ Church Cathedral Educational Society that must be paid in order to secure that space.

**Please note that the submission of this application does not constitute automatic acceptance.**

Acceptance for space is based on the following:

1. Siblings of children registered at our main school or childcare centre will have priority.
2. Other remaining spaces will be filled on a first come, first admitted basis (date application is received by the school office).
3. Within both categories above, priority will be given first to contributing members of the Anglican Church and then children of other Christian denominations.
4. Christ Church Cathedral Childcare reserves the right to waive the first come, first admitted criterion in order to achieve an appropriate balance in the class, including gender and the social, emotional and intellectual development of all of the students.

When the child has been accepted into Christ Church Cathedral Childcare & Junior Kindergarten, the family will be required to pay a deposit, complete a registration form, complete an Agreement for Care Contract, complete a Pre-Authorized Debit form and other forms for the childcare centre. These forms must be accompanied by a copy of your child's immunization records.

### HOURS OF OPERATION and FEE SCHEDULE

Hours	3-5 yrs.	2.5-3 yrs.	Anglican 3-5 yrs.	Anglican 2.5-3 yrs.
Short day 9:00am-4:00pm	\$875.00	\$625.00	\$825.00	\$575.00
Long day 7:30am-5:30pm	\$925.00	\$675.00	\$875.00	\$625.00

Please note there is an **Anglican discount** of \$50.00 per month for both the short and long day programs. The fees above reflect the \$100 for 3-5yr old and the \$350 for 2.5 yr olds credit to families as part of the fee reduction initiative.



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Please indicate your care needs, child's age when they would join and appropriate fee schedule:

Long Day  Short Day  Anglican  Age and Fee: \_\_\_\_\_

There are 2 intake months: **January** and **July**. Admission during other months is possible, space permitting.

Preferred Entry Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Surname: \_\_\_\_\_

Legal Name (if different from above): \_\_\_\_\_

Name Child is called (if different from above): \_\_\_\_\_

Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Anglican Church Parish (if applicable): \_\_\_\_\_ Envelope Number: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Address (if different from child's address): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Address (if different from child's address): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Citizenship: \_\_\_\_\_

### To be completed when the applicant has attended other daycare or childcare facilities:

**Daycares Attended** – List the last two facilities, starting with the most recent.

<u>School</u>	<u>Location</u>	<u>Date of Attendance</u>	<u>Teacher or counsellor</u>



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List your child's interests and hobbies (i.e. Lego building, swimming, art, etc.)

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## Supporting your child at Christ Church Cathedral Childcare & Junior Kindergarten

*The following section is necessary so the centre can begin to assess the intellectual, physical, social and emotional needs of your child in order to determine our capacity to properly support both your child and the classroom.*

Has your son or daughter reached their developmental milestones since birth? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, please provide details.

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Has your child had any assessments completed by Psychologists, Pediatricians, Occupational Therapists, Speech and Language Therapists, Educational Specialists, etc. or been enrolled in any special developmental programs as a young toddler? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please submit any relevant assessment/health services documents. Enclosed \_\_\_\_\_ Forthcoming \_\_\_\_\_

Has your child experienced behavioural problems? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes: please provide details and any necessary documentation.

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Educationally relevant medical and health information: (if yes to any of these questions, please provide the necessary documentation.)

1. Does your child have visual or hearing impairment? Yes \_\_\_\_\_ No \_\_\_\_\_
2. Has your child received a speech-language assessment or therapy? Yes \_\_\_\_\_ No \_\_\_\_\_
3. Does your child take any medications on a regular basis? Yes \_\_\_\_\_ No \_\_\_\_\_
4. Is your child able to participate in an active multi-kinaesthetic educational program? Yes \_\_\_ No \_\_\_  
If you answer NO, please explain why.

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Is there any other information about your child that you feel the centre should know in order to help him/her integrate well into the School (e.g. social, medical situations, allergies)?

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This application must be returned with the non-refundable application fee of \$50 in order for your child to be placed on the Christ Church Cathedral Childcare list.

**Please use one form for each child you wish to enrol.**

**I understand this is only an application and does not constitute registration. I understand that the omission of relevant and significant information will cause this application to be withdrawn.**

*(All parents/guardians must sign.)*

Parent or Guardian #1: Name \_\_\_\_\_

\_\_\_\_\_  
Signature Date

Parent or Guardian #2: Name \_\_\_\_\_

\_\_\_\_\_  
Signature Date

Date received at the School: \_\_\_\_\_