



**CONNECTIONS**  
COMMUNITY SERVICES



# Connections Kids Club

A place where children are safe, respected  
and have a whole lot of fun

Before-and-After School Program operated by:

**Richmond Parent Handbook 2024-2025**



Ministry of  
Children and Family  
Development

## Introduction and Philosophy

The Before-and-After School Program is managed and operated by Connections Community Services Society, a local charitable organization that has been serving the community since 1974. Our agency has been running camps and after-school programs for many years. Our first licensed childcare was launched at Blundell Elementary in 2014. In September 2015 we opened an additional location at William Cook Elementary.

Thanks to a School's Out Grant from United Way Lower Mainland, we can offer affordable and accessible care for families in Richmond.

Our childcare center's mission is to create a caring, affordable, inclusive and quality child-directed program where children aged 5-12 learn through play in individual, group, structured and unstructured activities. Our philosophy of care is based on the BC Early Learning Framework and strives to support each child in experiencing and achieving:

- **A Sense of Well Being and Belonging**
- **Exploration and Creativity**
- **Language and Literacy**
- **Social Responsibility and Diversity**

We believe that each child is capable and full of potential. At our center your child will be supported in all key areas of child development. "Early learning refers to the emerging and expanding of young children's **physical, intellectual, emotional, social, and creative** capacities. All children are born with a curiosity about themselves, other people, and the world around them, and in this sense are born learners. As they grow, they develop both their capacity and disposition to learn through supportive relationships with their families, with other children and adults in their communities, and with their environments. Early learning is the foundation for lifelong learning, and the basis for individual, social, economic, and environmental well-being."<sup>1</sup>

### **Physical:**

Students will go outside for physical activity and fresh air every day as well as use the school gym on special occasions. The outside activities are organized to promote and enhance gross motor skills and engage students in team/large group adventures as well as an opportunity to use playground apparatus. Examples of activities of team-building games are scavenger hunts; capture the flag, soccer etc. These activities will help build connectedness between children and their peers, volunteers, and adult staff.

### **Intellectual:**

Intellectual development is encouraged and supported by providing materials that facilitate the exploration of student's interests in depth. Students have access to materials such as manipulative toys, puzzles, board games, building structures, books and math materials. By

<sup>1</sup> British Columbia Early Learning Framework

linking kids to success in learning, making it fun and developing their social networks we see dramatic increases in their outlook towards school and personal success: A key component of our after-school programs is homework support, where children are given time and one to one assistance with their homework or other educational activities such as games, reading and workbooks. A key focus of our work is to make learning fun and provide support for kids to develop within their own learning style. Students also have access to tablets for homework and educational games. Space is designed within the room for utilization of these resources, including a quiet homework area.

### **Emotional:**

Children are encouraged to face challenges by using a problem-solving approach. This includes naming the problem, generating ideas to solve the problem, implementation, and evaluation of the problem-solving process. This process is done together by the staff and student by going through the discipline or problem buster's form. Staff will treat all students with respect by listening, supporting, guiding, and providing the students with opportunities to grow in all areas of development.

### **Social:**

Students can socialize in many areas of our space. Students are provided space within the classroom for individual or small group activities or outside for large group games. The staff will assist and provide an environment that capitalizes on emerging interests of the students. This is accomplished by encouraging and providing students the opportunity to plan and lead group activities they have interest in, thus promoting and enhancing leadership skills. We promote peer socialization through activities that build relationships such as teamwork in group activities, friendship skills by introducing children to new friends, positive outlook towards school and community by supporting them with their homework and connecting them to resources that are offered in the community.

### **Creative:**

Students will be provided with activities by staff and/or volunteers and will further be encouraged to explore new and different ways of manipulating ideas and materials in their own unique way. It is understood that creative endeavors can take place anywhere and anytime. Creative activities may include arts, crafts, baking, building toys and drama.

We believe that each child is capable and full of potential. Through participating in the **Before and After School Program** your child will:

- Build friendships and confidence  
Develop social, emotional, physical, and intellectual skills.
- Encouraged to explore their interests and nurture their creativity.
- Play games and use their imagination.
- Have access to age-appropriate materials and equipment.
- Be given the opportunity to do and get help with their homework.



Our agency strives to be a leading provider of childcare services within our community and in doing so hires qualified staff with specific training around school-age care,

including First Aid, CPR and Food Safe certification. We also support our childcare staff to continuously upgrade their education to best support the children in our care by providing regular professional development opportunities. All our staff meet and exceed licensing standards.

The **Before and After School Program** also provides:

- Daily healthy snacks.
- Care on Professional-Development Days, Early Dismissal Days and during School Breaks.
- Educational and Fun Outings and Presentations.
- An environment that embraces and respects cultural diversity.
- Understanding that quality and affordable care is a vital support to families, children, and the community.
- Outside play time every day.
- Sports and games.
- Help with homework.



## Registration and Fee Information

Registration is based on a first-come, first-served process, with priority given to returning families or families who were on the waitlist previously. Due to licensing guidelines, we can only accept a limited number of children. Once a location is full, families will be placed on a waitlist.

All forms and required documents must be completed at the time of registration, as well as all post-dated cheques (September-June). **Cash payments cannot be accepted.** Cheques must be made payable to "Connections Community Services Society or CCSS", payments may also be made by Credit card (an invoice will be sent with a link to pay online monthly)

**\*\*\* Credit card payments may also include a 3% processing fee. \*\*\***

Fees are established as part of the annual budget process and comparable to another childcare within Richmond. There is an **annual non-refundable registration membership fee of \$35** which covers administrative costs for updating student records, registration, and yearly membership.

Affordable childcare benefits may be available for families in need, [gov.bc.ca/childcarebenefit](http://gov.bc.ca/childcarebenefit) or call **1-888- 338-6622**. These are not offered by our agency, and you must apply for them. We can help you with the forms, but they are submitted to the government. Our agency receives the Childcare fee reduction initiative (CCFRI) which reduces the monthly fee for every full-time child in the program. (See fee structure in later pages. Note Kindergarten student receive more than grade 1-7 students)



## Required Documents for Registration

All documents are required at the time of registration. Children will not be allowed to attend the program unless their application is complete. Parents are responsible for updating the program if any information has changed.

- \$35 registration membership fee cheque (once per school year).
- 10 postdated cheques (Sept-June) if not paying by Credit card.
- Program Registration Form
- Behavior Management Form (signed by parent and child)
- Current Photo: email to [chjldcare@ccssociety.ca](mailto:chjldcare@ccssociety.ca) Subject: (your child's name/school)
- Current Vaccination/Immunization Records
- Emergency Consent/Registration Form
- Waiver**

### **If your family has a Custody Order or Agreement:**

- Copy of Custody Order or Agreement Required
- Required Support Form

### **If your child has an EA or any medical diagnosis:**

- Additional helpful documents such as IEP or Care Plan

## CONNECTIONS KIDS CLUB INFORMATION

### HOURS OF OPERATION

Our regular hours are 8am-9 and school dismissal to 6:00pm. Our hours may be extended due to early dismissal, camps during winter break, spring break and summer vacation. Make sure you check to see times for these days (camps are generally over at 5:30).

### WEATHER

In the case where weather forces the school to be closed, we will not be able to operate. Please make sure you are aware of any school closures. Also, if the school day is cancelled once they are already at school it is the parents' responsibility to come and get their child.

### ABSENTEEISM

Notification is required if a child will not be attending the program to avoid causing any concern. Parents must notify the program staff in advance by calling, texting or in person.

### AUTHORIZED PICK UP

When students are picked up from the program only persons listed on the authorized pick-up list from the registration form will be able to sign out the child. If in case of emergency someone else is to pick up the child, the parent will have to notify the program with the name of the individual and photo identification may be required to sign the child out.

### CUSTODY

If there is a custody agreement or court order for your child, you must provide a copy upon registration to our program. Staff will respond according to this document. If there are

restrictions in place the program will take direction from the parent to which the child resides.

### LATE PICK UP

We expect that all children are picked up by closing. Late pickups may result in additional charges and recurring late pickups may result in withdrawal of services. When a child is not picked up by closing staff will contact the parents and then the emergency contact person. If after 30 minutes the staff are unable to contact parents or emergency contact staff will call the Ministry for Children and Family Development who will take your child into care until you can be located.

### FAILURE TO ARRIVE AFTER SCHOOL

If a child does not arrive to the program after school dismissal and staff have not been notified in advance staff will call the parents, or emergency contact, school secretary and if no one can account for the child whereabouts then staff will call 911 and report the child missing.

### CLOTHING

Each day the program will spend time outside so please send your child appropriate clothing and footwear. It is often suggested that you may send extra clothes to keep at the program (extra socks, mittens etc.)

### TOYS FROM HOME

We do not encourage children to take items from home as they often get broken or lost. If items are brought, they will be required to stay with the children's bag or held by staff

until parents arrive to pick them up. The Connections Kids Club is not responsible for items left at our program sites.

### STAFFING

All our staff members meet the criteria outlined in the Childcare Licensing Regulations - 19yrs of age or older.

- Have a completed and clear criminal record check.
- Have First Aid and CPR.
- Adhere to the Provincial Immunization Program.
- Have received a minimum of 20 hours of education in Child development, health, safety.

### SUPERVISION

CCSS adheres to licensing guidelines for supervision ratios and has at least one staff on site for every 12 children. Children must be always supervised by an adult while signed into the program. If a child leaves the program without being signed out by an authorized adult, parents will be notified. If a child runs away from the program, staff will follow but if this becomes a recurring thing an extra staff may have to be brought in for safety, not at the expense of CCSS. In extreme situations a child may be required to leave the program.

### INFORMATION UPDATE

Parents are required to report any changes in address, phone number or emergency contact. An updated file must be kept for each child. Including any changes to the people who are authorized to pick up your child.

### MEDICATION:

CCSS staff will be trained in the use of the Epi-Pens for the treatment of emergency allergic reactions and are only

authorized to administer medication to a child that requires specific chronic care or in emergency situations. Children who require medication will need to complete a Care Plan.

### **ILLNESS**

Children who are sick, unable to participate in the program's regular daily activities, are asked to stay home as to not spread illness to other children or the staff of the program. If a child becomes sick while in our care, parents will be notified, and an authorized adult must pick up the child.

### **FIRST AID**

Minor accidents and illnesses are common occurrences with children. All incidents will be reported to parents and CCSS staff hold valid First Aid certificates and can handle minor cuts and scrapes. Each site has well equipped first aid kits. Incidents requiring medical attention are reported to the child's parent immediately. If Immediate attention is required during the program hours CCSS staff will arrange transportation to the nearest hospital.

### **FOOD AND NUTS**

Due to health regulations all food must be prepared by staff for distribution to the children. We offer a nut free program. Parents are asked not to bring any food for distribution to all children in the program. Any snack brought by the students for their own personal consumption must also be nut free.

### **EVACUATION SITES**

In the event the children need to be evacuated from the school due to an emergency an alternative site has be

designated and the location is posted in the program. Parents need to familiarize themselves with these sites.

### **Blundell**

Primary location - Front Playground  
Secondary shelter- Rosewood Manor

### **Cook**

Primary location- West Playground  
Secondary shelter- Anderson School

### **TAIT**

Primary location – Field by Playground  
Secondary shelter- Golf town (Bridgeport & No 4 Road)

### **SPECIAL OUTINGS/PRO D**

Most outside activities are located at the school. There may be field trips on Pro- d days or camps which require transportation. Transportation will either be by CCSS school bus, or the group walk to a close location. In the case of shuttle service between two programs the use of the agency van or appropriately insured staff vehicles may be used.

### **PROGRAM CLOSURES**

#### **CONNECTIONS KIDS CLUB WILL NOT OPERATE ON STATUTORY HOLIDAYS**

These include- New Years Family Day, Good Friday, Easter Monday, Victoria Day, Canada Day, Labor Day, Thanksgiving, Remembrance Day, True Reconciliation Day, Christmas Day, and Boxing Day.

### **PARENTAL CONCERNS**

If you have a concern about the program or the care of your child at one of our programs, we suggest that you follow the

steps outlined below. This will give you the opportunity to state your concern and will give the staff an opportunity to work with you to ensure that solutions are found,

Speak with staff members!  
Speak with the team lead.  
Cook: 604-306-0888.  
Blundell: 604-306-3611  
TAIT: 604-306-0449  
Contact the office at 604-271-7600, or 604-417-0579.

### **BEHAVIOUR AND CONSEQUENCES**

#### **Be Respectful**

#### **Be Safe**

#### **Be Responsible**

If these rules are not followed, then the following will take place.

- staff speaks to child about behavior.
- child may be removed from group for a short period of time if behavior continues.
- Parents contacted and if behavior is unsafe for their child or others, they may be asked to come pick up their child.
- if continuing staff will meet with parents to discuss a behavior management plan before child can return to program.
- If a child continues to be unsafe extra staff may be required for extra support to participate in the program. In extreme circumstances the child may not be able to participate in the program.

### **WINTER AND SPRING BREAK CAMPS**

Families must pre- register for camps. Winter camp is only open for one week to give staff a chance to be with their families. Spring Break camp is for both weeks. Families who pay for before and after care during the school year do not need to pay for it during camp just the weekly fee.

## **SUMMER CAMP**

Summer camp is separate from the school year monthly fees. We run up to eight weeks of camp and the fees are weekly. When you register you may pick the weeks you want. When you register you indicate whether you will need it before or after care. Payment for the first week of camp is due at the time of registration and other payment methods (postdated cheques etc.) are required by the start of your first session. If you sign up for the camp and wish to cancel a week or more, you must give at least two weeks' notice or there will be a charge of \$50.

## **MONTHLY FEE**

There is a \$35 registration fee that must be paid when you first register with our program as well as when you renew for the following year.

The monthly fee is based on the yearly rate divided by the 10-month school year. Each month will be the same despite school breaks.

There will not be discounts or refunds for missed days, sick days, or vacations.

Fees are due on the first of each month. Failure to make payment can result in termination of care. If payments are declined there may be an extra charge of \$35.

## **WITHDRAWAL OF SERVICES**

Parents must give in writing at least one month's notice of their child leaving the program, or they will be charged for the next month in full.

## **Cultural Awareness**

All employees and volunteers will recognize and respect those students who have cultural, religious, or individual preferences when creating and

preparing activity and snack plans. We encourage parents to assist in creating a culturally diverse and representative environment. If your family would like to share your cultural traditions with the group, please speak to one of the staff members on how to incorporate your practices into the program.

## **TAX RECEIPTS**

CCSS will provide payers with a Childcare Income Tax Receipt on or before February 28<sup>th</sup> of each year for the prior year's Fees.



## SCHOOL YEAR FORM FOR RICHMOND SITES

<b>Child's Full Name:</b>			
<b>School:</b>		<b>Grade:</b>	
<b>Classroom/Division (if known):</b>		<b>Teacher (if known):</b>	
<b>Adult Contact:</b>		<b>Contact Number:</b>	
<b>Email Address:</b>			
<b>Desired Start Date:</b>			

All full-time students (5 days a week) are eligible to participate in our AM and PM care, including early dismissal and PD days. Full-day programs during school closures in winter, spring, and summer are available at an additional cost. For consistent staffing purposes, please indicate the service you will most likely need regularly. Those who choose PM only can use the AM care when needed; just inform the team lead 24 hours in advance so that we can arrange for additional staff if necessary (ratio is 1:12)

- AM and PM care daily
- PM care only
- PM care with occasional AM Care

**Fee structure with fee reduction initiative**

Grade	Program Fee	Minus CCFRI	Parent Pays	With Subsidy	Parent Pays
1 – 7	\$525	\$115	\$410	If family applies and receives an amount from government	Varies based on what family receives in subsidy
Kindergarten	\$525	\$320	\$205		

## Behavior Management Form

Please discuss the following rules with your child and sign the waiver together:

**We Are Respectful-** We are respectful of ourselves and other people. We are respectful of other people's ideas and feelings. We are respectful of the environment, equipment, and materials in the classroom and outside.



我們必須互相尊重!

我們必須互相尊重!

**We Are Safe -** We work and play safely to help keep ourselves and others from getting hurt.



我們是安全的!

我們是安全的!

**We Are Responsible -** We take responsibility for our actions and our words. We treat others as we want to be treated. When we make a mistake, we problem solve rather than make excuses.



我們是有責任感的!

我們是有責任感的!

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Please have your child print their name above)

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

If your child is a risk to themselves or others, parents will be contacted immediately for early pick up. A behavior support plan may need to be created before the child returns to the program. If risky behavior persists, the child may require additional support, such as a one-on-one worker, to participate in the program. In extreme circumstances the child may not be able to participate in the program.



# Registration Form

**Name of Facility:**

**CHILD'S STARTING DATE:**

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
YY MM DD

**SEX:**

M \_\_\_\_ F \_\_\_\_

**DATE OF BIRTH:**

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
YY MM DD

**NAME OF CHILD:**

(Surname)

(Given Names)

(Also Known As)

Name the Child responds to: \_\_\_\_\_

Address: \_\_\_\_\_

Postal code: \_\_\_\_\_ Phone: \_\_\_\_\_

Person(s) with whom the child lives (adults and children): \_\_\_\_\_

Child's first language: \_\_\_\_\_ Other languages: \_\_\_\_\_

**Parent(s) / guardian(s):**

Name: \_\_\_\_\_ Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Work phone: \_\_\_\_\_ Days/hours of work: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name: \_\_\_\_\_ Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Work phone: \_\_\_\_\_ Days/hours of work: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Person(s) authorized to pick up the child and be contacted in case of emergency. These people should be available during hours of care. (include mother / father / guardian):**

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

**If appropriate, list an English speaking contact:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Has the child previously attended daycare/preschool?**

YES  NO

Comments: \_\_\_\_\_

**Comments/instructions to help us care for your child. (Please feel free to add additional pages.):**

Toileting/Diapering (special words): \_\_\_\_\_

Rest Time (special comfort – toy/blanket): \_\_\_\_\_

Eating/Mealtime (include food likes/dislikes): \_\_\_\_\_

Fears: \_\_\_\_\_

**Please tell us anything else you think will help us provide an enriching experience for your child:** \_\_\_\_\_

**HEALTH INFORMATION**

Health professionals involved with your child (other than doctor and dentist):

<b>NAME</b>	<b>PROFESSION/AGENCY</b>	Phone: _____
_____	_____	_____
_____	_____	Phone: _____
_____	_____	Phone: _____

**Does your child have:**

A medical condition/concern? YES  NO   
If yes, please provide further information: \_\_\_\_\_

Allergies? YES  NO   
If yes, please provide further information: \_\_\_\_\_

Asthma? YES  NO   
If yes, please provide further information: \_\_\_\_\_

Has your child had a seizure in the past year? YES  NO   
If yes, please provide further information: \_\_\_\_\_

Does your child require a special diet related to a medical condition? YES  NO   
If yes, please provide further information: \_\_\_\_\_

Food sensitivities? YES  NO   
If yes, please provide further information: \_\_\_\_\_

**List all prescription and “over the counter” medications your child receives:**

<b>Medication</b>	<b>Times Given</b>	<b>Reason for Medication</b>
_____	_____	_____
_____	_____	_____

You may be asked to complete additional forms if you answered yes to any of the above.

This health information may be made available to the staff of Vancouver Coastal Health.

<b>Custody Agreement</b> YES <input type="checkbox"/> N/A <input type="checkbox"/>	<b>Provided to Facility</b> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/>
<b>Immunization Documents Returned to Facility</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	
<b>Information Provided By:</b> _____	_____
DATE: <u>    </u> / <u>    </u> / <u>    </u> YY      MM      DD	Print Name _____ Signature _____
<b>Information Received By:</b> _____	_____
DATE: <u>    </u> / <u>    </u> / <u>    </u> YY      MM      DD	Print Name _____ Signature _____

<b><i>Office Use Only</i></b>
<b>Date Child Leaves the Facility:</b> DATE: <u>    </u> / <u>    </u> / <u>    </u> YY      MM      DD



## Required Support

Information	Details
Does your child have a support worker in school? Has your child ever had a file with Supported Child Development (SCDP)/Richmond Society for Community Living <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does your child have any Communication Limitations? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does your child have any Social/Emotional/Behavioral Challenges? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are there any Safety Risks (running away, aggressive behavior, etc.) that our program needs to be aware of? <input type="checkbox"/> Yes <input type="checkbox"/> No	
What current strategies or supports are in place to assist this child? If your child has a support worker (EA, Behavioral Interventionist, Therapist), we ask that the support worker fill this form out with you.	
What strategies or supports would best help this child to have a successful experience? If your child has a support worker (EA, Behavioral Interventionist, Therapist), we ask that the support worker fill this form out with you.	
Additional Comments or Advice? Please attach any supporting documentation such as IEP, Care Plan or Assessments.	
<i>While we want to support all children, some children may need a Support Worker to be successful in a group day care setting. We will work with SCDP and your family to try to make this possible, but in some circumstances group day care may not be the best fit.</i>	

I attest that the above information is true.

Signature: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

## Waiver

- (1) I understand that here is a nonrefundable \$25.00 annual administration fee to be paid at the time of registration. My child(ren)'s monthly childcare fee shall be paid by post-dated cheques from September through June, dated for the first of each month. Additional fees for Winter, Spring and Summer Camp shall be paid by cheque. There will be a \$35 charge for any payment rejected by the bank. Fees are due on the first of the month. My child will not be considered registered unless payments have been issued. Where this is not feasible, I will contact the Director, to request, in writing, alternate arrangements for the payment of fees. I will provide a current subsidy form if applicable, plus payments for the balance of the monthly fee. Monthly fees take these periods into account and are averaged out and equalized from Sept.- June. All monthly fees include early dismissal, professional days and single district closure days that fall on a day that your child is regularly registered. The program does not issue credits for sick days, vacation days, or any unexpected center closures. Some examples could include but are not limited to strike days, snow days, black out days, all natural disasters, etc.
- (2) I have completed and will keep updated the following: (i) Registration & Health Form (ii) Emergency/Field Trip Consent Card (iii) Immunization Record (3) That I have listed below all names of persons who are legally restricted in access/contact with my child due to a Court Order/Separation Agreement.

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

A copy of the relevant Court Order or Separation Agreement must be attached, and any changes filed with the program immediately.

- (3) I understand that to attend the center, my child must be well enough to participate in all aspects of the program including outdoor play. I will advise the staff of any changes in my child's health and update any records immediately upon any changes occurring. To safeguard the health and wellbeing of all children, I understand that the supervisor has the right to exclude my child from the center and I will provide, upon the supervisor's request, written medical clearance from a physician before my child is re-admitted. I understand that only medication, prescribed or recommended for my child in writing by a physician and provided in its original packaging with full instructions and precautions, will be administered to my child by center staff. The center staff will only administer the medication if I have completed a "Permission to Administer Medication" form and have provided this form to staff.
- (4) I understand that if my child is a risk to themselves or others, parents will be contacted immediately for early pick up. A behavior support plan may need to be created before the child returns to the program. If risky behavior persists, the child may require additional support, such as a one-on-one worker, to participate in the program. In extreme circumstances the child may not be able to participate in the program.
- (5) I will sign my child out each day on the Sign In/Out sheet posted in the center. I will notify center staff in writing if someone other than those persons authorized by me on the Emergency Consent card will be picking up my child. I will phone to notify center staff when my child will be absent from the center (including attending school activities, such as sports games). I understand that late pick-up fees will be charged for pick up after 6pm at a rate of \$5/15 minutes. I understand that if, after a half an hour (1/2) hour from center closing time, the staff has been unable to contact me or the designated emergency contacts, in accordance with licensing regulations, the Emergency Care Office at the Ministry of Children and Families will be notified. They will deal with the situation accordingly.
- (6) I understand and acknowledge that each participant must assume the risk and any related financial responsibility that could result from participation in any of the activities provided by the Connections Community Services Society (CCSS). I agree to assume such risks and responsibilities.
- (7) I understand that if I need to cancel my registration, I must give one month's written notice on or before the 1<sup>st</sup> of the month. I also understand that cancellations with less than one month's notice are non-refundable.
- (8) I understand that photos of my child will be taken for documentation and program purposes, such as newsletters. Photos of children will not be used for marketing purposes or put online without separate written consent.**
- (9) I authorize my child to participate in program activities, field trips and arranged transportation.

Parent/ Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## Consent for Photographs

Dear Parents/Guardians,

During our program, there may be occasions when staff will capture photos of various activities in which the children are participating. Occasionally, we may wish to use some of these photos for promotional purposes, including but not limited to websites, agency newsletters, and annual reports and brochures.

To ensure transparency and respect your preferences, we kindly request your consent for photographing your child during the program. Please indicate your choice by selecting one of the options below:

- I give my consent for photos of my child to be used in promotional or agency materials.
- I consent to photos being taken of my child, but only for internal circulation within the school and not as part of promotional material.
- I do not give permission for any photos to be taken of my child at all. Not even within internal newsletter circulation.

Parent/Guardian Name: \_\_\_\_\_

Child's Full Name: \_\_\_\_\_

Date: \_\_\_\_\_

Thank you for your cooperation. Your child's privacy and comfort are of utmost importance to us. If you have any questions or concerns, please feel free to contact us.

## Termination Form

Name of School: \_\_\_\_\_

Name of Student(s): \_\_\_\_\_

Reason for termination: \_\_\_\_\_

Enrollment in the Before and After School program is terminating on \_\_\_\_\_  
(date required)

**At least one month's notice is required** on or prior to the first day of the month. For example, if this form is received in November, the final month paid will be December, even if the child is leaving prior to the end of December.

Last payment to be processed on \_\_\_\_\_ 1<sup>st</sup>, \_\_\_\_\_.  
(month) (year)

Date form received by program: \_\_\_\_\_

Site Coordinator's Signature: \_\_\_\_\_

Date:

Parent/Guardian's Signature: \_\_\_\_\_

Date:

## **Additional Program Information**

### **FIRST DAY OF SCHOOL (DAY 1):**

The first day of school, typically lasting only a few hours, will be closed to regular operations. However, we will have staff available for an Open House. If you and your child would like to come in, meet our staff, and see the classroom, we encourage you to do so. Specific times for the Open House will be emailed to families, considering school hours and room availability.

### **SECOND DAY OF SCHOOL (DAY 2):**

We will be open for our regular hours on the second day of school. All enrolled children are welcome to attend during these hours. For kindergarten children, the first two weeks will follow a gradual entry schedule. Parents can choose to drop off their kids during our regular hours of operation. Once they transition to full-day kindergarten, they are welcome to attend our program daily. Our staff will pick up kindergarten students from their class in the afternoon and drop them off at their class in the morning.

## **Locations and Contact Information**

### **Head Office**

110 – 5751 Cedarbridge Way,  
Richmond BC V6X 2A8  
604-271-7600  
604-417-0579 – Program Coordinator

### **William Cook Elementary School**

Multipurpose Room  
8600 Cook Road  
Richmond BC V6Y 1V7  
604-306-0888

### **TAIT Elementary School**

Room 10144  
10071 Finlayson Drive  
Richmond BC V6X 3X4  
6047-306-0449

### **Blundell Elementary School**

Portable B  
6480 Blundell Elementary School  
Richmond BC V7C 1H8  
604-306-3611

### **Caulfeild Elementary School**

4685 Keith Road  
West Vancouver BC V7W 2M8  
604-306-2121