



City Hall Child Care Society

A NON-PROFIT CENTRE FOR EARLY LEARNING & DEVELOPMENT

PRE-ENROLLMENT APPLICATION

CITY HALL EMPLOYEE	YES		No		Dept		
DATE of APPLICATION	Expected Due Date or Date of Birth			Name of Child or TBD			
Name of Parent / Guardian				Name of Parent / Guardian			
Email Address				Email Address			
Home Phone				Home Phone			
Work Phone				Work Phone			
Cell Phone				Cell Phone			
<p>If your child has extra support needs and/or you are currently consulting with IDP please contact Centre for Ability 604-451-5511 to discuss childcare options with a consultant</p> <p>Please review enrollment information on our website prior to emailing one application per child to cityhallchildcare@telus.net</p> <p><u>The Pre Enrollment Application does not confirm enrollment</u></p>							

City Hall Child Care Society is interested in collecting information from families.

We would like to know what your ideal childcare preference would be.

Please check the arrangement that best describes the age you would ideally like to enroll your child

This information is for internal purposes only.

	I would like to enroll my child prior to 10 months old
	I would like to enroll my child prior to 12 months old
	I would like to enroll my child prior to 16 months old
	I would like to enroll my child prior to 18 months old
	I would like to enroll my child prior to 2 years old
Other? Please describe	