WESTVIEW LUNCH PROGRAM REGISTRATION FORM 2024 / 2025 <u>**June 3, 2024**</u>	FOR LUNCH PROGRAM USE ONLY Student's Name Teacher's Name Room # Image: Full time Medical Concerns Yes No			
Are you registering more than one child in the program? Yes or No (complete a separate form for each child)				
CHILD'S NAME:	Birth Date: Grade in 2024/25 - 1 2 3 4 5 mm/dd/yyyy circle one			
Address: Posta	Il Code: Home Phone #:			
Parent / Guardian Name:	Employer:			
Day Time Phone #: Cell # :	Email :			
Parent / Guardian Name:	Employer:			
Day Time Phone #: Cell # :	Email :			
EMERGENCY CONTACT (Parents/Guardians will be con	ntacted first)			
Name:	Relationship to Child:			
Address: Ph	one # 1: #2:			
SPECIAL INSTRUCTIONS FOR MY CHILD – i.e. Alle	rgies, medications, medical (medical alert bracelet)			

**Lunch Program staff maintain the confidentiality of all information pertaining to students and their Families.

Please notify the Lunch Program Coordinator at 204-958-6412 immediately of any changes to the above information.

Registration Options

Full Time- The student will be eating lunch at school every dayPart Time- The student will be eating lunch at school on a less than full time basis

All unpaid fees from the previous school year (s) must be paid in full

before registration for the 2024 - 2025 school will be accepted.

PAYMENT OPTIONS: (please check either Full Time or Part Time and the desired payment plan):

Full Time:	□ 1 cheque:	- \$183.00 per child, dated June 3, 2024 <u>OR</u>
	\square 1 cheque:	- \$183.00 per child, post-dated September 4, 2024 OR
	\square 2 cheques:	- \$91.50 per child, post-dated September 4, 2024 and February 1, 2025
	\Box 6 cheques:	- \$30.50 per child, post-dated September 4, 2024 and the remaining five cheques post-dated for the 1st of each month, October 2024 to February 2025.
Part Time:	\square 1 cheque:	- \$91.00 per child, post-dated September 4, 2024 - provides 91 days (approximately 1/2 of the school year)
	\square 1 cheque:	- \$45.00 per child, post-dated September 4, 2024 - provides 45 days (approximately 1/4 of the school year)
	\square 1 cheque:	- \$10.00 per child, post-date September 4, 2024 - provides 10 days (equivalent of one day per month)

*** Please purchase part time days carefully, as there are no refunds. ***

- 1. Completed Registration Form for each child, along with the appropriate payment when applicable, can be returned to the School Office starting on or before **JUNE 3**, 2024.
- 2. Please place your registration forms and payment in a sealed envelope with your family name on the outside.
- 3. Please make cheques payable to: WESTVIEW LUNCH PROGRAM
- 4. Receipts will be issued once payments have been processed by our financial institution.
- 5. Westview Lunch Program will be **accepting the payment of user fees through cheque only**. If this is a concern, please call the Principal, 204-958-6412.
- 6. 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.
- 7. Late payment will result in removal from the Lunch Program. Parents/guardians will need to make alternate supervision arrangements for the lunch break. All outstanding fees must be paid in full in order to access the program thereafter.
- 8. Please note a <u>\$5.00 chargeback fee will be applied to all NSF cheques</u>.

ACKNOWLEDGEMENT

My child and I have gone over the attached Policies and Expectations 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
Date	I understand the expectations of the Lunch Program and I promise to follow them.

Child's Name (please print)

Child's Signature

If you have any questions/concerns about the Lunch Program, please contact the Westview Lunch Program Committee at 204-958-6412.