FOR LUNCH PROGRAM USE ONLY				
Student's Name _				
Teacher's Name _				
Room #				
□ Full Time	□ Part Time/Casual			

BERNIE WOLFE SCHOOL LUNCH PROGRAM

REGISTRATION FORM 2025 / 2026

PLEASE NOT	E: <u>This is a</u>	supervision p	rogram only. St	udents will provide th	eir own lunches. Fo	od is not provided.
* Please Print	t					
CHILD'S NAME		Bir	Birth Date Grade in 25 / 26 mm/dd/yyyy			
Address			Po	stal Code	Phone Number	
Parent(s) / 6 Name(s)	Guardian(s)	Relationsh	ip to Child	Email		Cell Phone Number
Receipt Issu	ed to:					
EMERGENCY	CONTACT (Pa	arents will be c	ontacted first)			
Name		Relationship	to Child	Address		Phone Number
SPECIAL INSTRUCTIONS FOR MY CHILD - i.e. allergies, medications, medical (medical alert bracelet for example)						
Ple	ase notify the	e Lunch Progra	m, 204.958.6532	, immediately of any	changes to the above	information.
			REGISTE	RATION OPTIONS		
Full time Part-time		the student will be eating lunch at school every daythe student will be eating lunch at school on a less than full time basis				
All unpaid fees from the 2024 / 2025 school year must be paid in full before registration for the 2025 / 2026 school will be accepted.						
My Child Will Participate in the lunch program on the following basis (please check one):						
		1 Cheque	\$160.00 per chil	d Dated September 1	2, 2025	

	2 Cheques	\$80.00 each per child	Dated September 12, 2025 and January 1, 2026
	1 Cheque	\$20.00	Dated September 12, 2025 - provides for 20 days

We will advise you that further payment is required when you have five (5) days remaining.

N.B. Please purchase part time days carefully. Refer to section 1.09 Refunds. There are no refunds.

Please:

- 1. Return a completed Registration Form for each child, along with post-dated cheques when applicable, to the School Office on or before **FRIDAY**, **SEPTEMBER 12**, **2025**.
- 2. Make cheques payable to: BWSLP. Please place your payment in a sealed envelope with your family name on the outside.

We prefer to receive payment by cheque as we are not responsible for lost or stolen cash. 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.

Late payment may result in removal from the Lunch Program. Please see Section 1.06 Late Payment in the Policies and Expectations.

ACKNOWLEDGEMENT

My child and I have gone over the emailed 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			
understand the expectations of the Lunch Program and I promise to follow them.						
Child's Name (please p	orint)	Child's Signature				

If you have any questions or concerns about the Lunch Program, please contact the Bernie Wolf School Lunch Program Committee at 204.958.6532.