	FOR LUNCH PROG			
	Student's Name			
	Room #			
		Part Time/Casual		
l				
ÉCOLE MARGARET UNDERHILL USER-PAY LUNCH SUPERVISION				
PROGRAM REGISTRATION FORM 2024/2025				
CHILD'S NAME	Birth D		024 / 2025	
		mm/dd/yyyy		
Address	Postal Code	Home Phone Number		
MOTHER/GUARDIAN NAME		Employer		
Day Time Phone Number Ce	ell	Email		
FATHER/GUARDIAN NAME		_Employer		
Day Time Phone Number Ce	ell	Email		
EMERGENCY CONTACT (Parents will be contacted first)				
NAME	Relatio	nship To Child		
Address	Phone Number			
SPECIAL INSTRUCTIONS FOR MY CHILD - i.e. allergies, medications, medical (medical alert bracelet for example)				
Is there a sibling in the Lunch Program?NoYes NameGrade				
Please notify the Lunch Program, 204.958.6832, immediately of any changes to the above information.				
REGISTRATION OPTIONS				
Full time - the student will be eati	- the student will be eating lunch at school every day			
rt-time - the student will be eating lunch at school on a less than full time basis				

My child will participate in the lunch program on the following basis (please check one):

Full time:	1 cheque	\$170.00 per child, dated for September 4th, 2024; OR
	2 cheques	\$85.00 per child, dated for, September 4th, 2024 and Feb. 20, 2025
	—— Part time:	\$9.00 for 10 days- Attendance record punch card will be kept at school parent will be notified by UPLSP staff should more days need to be purchased.

- **N.B.** Please purchase part time days carefully. Refer to section 1.09 Refunds. There are no refunds.
 - 1. Please return a completed Registration Form for each child, along with the applicable payment to your child's teacher on or before **September 27th**, **2024**.
 - 2. <u>Please make cheques payable to: EMU UPLSP. Please place your payment in a sealed envelope with your</u> family name on the outside.

We recommend paying 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 will result in removal from the Lunch Program.

ACKNOWLEDGEMENT

My child and I have gone over the Policies and Rules that are found on our school website/and emailed to me and we understand them. I understand that if they are not followed, my child may lose the privilege of participating in the Lunch Program.

Parent/Guardian Signature

Date Parent/Guardian Name (please print)

I understand the rules of the Lunch Program and I promise to follow them.

Child's Name (please print)

Child's Signature

If you have any questions or concerns about the Lunch Program, please contact the École Margaret Underhill User-Pay Lunch Supervision Program Coordinator at 204.958.6832.