



Administration Office
 Phone: 604-882-4909
 Fax: 604-882-4907
 Email: kidsinthegrove@hotmail.com

2010/11 Registration Form

Child's Name: _____ Birth Date: _____
 Parent(s) Name: _____ Child's Age: _____
 _____ Phone: _____
 Address: _____ Email: _____
 School: _____

Program of Choice			
Preschool Curriculum (9am - 11:30am)		Kinder Care	
3 year olds - T TH	\$100/month	Full Time 4-5 days	\$450/mo. _____
4 year olds - M W F	\$150/month	Part Time 3 days	\$350/mo. _____
		Drop In	\$36/day _____
4 Year Old Care (9am-2pm)		Out Of School Care	
M W F	\$250/mo. _____	Full Time 4-5 days	\$400/mo _____
M to F	\$300/mo. _____	Part Time 3 days	\$300/mo. _____
OSC Drop In		School Days \$18	Pro D Days \$36 _____

***Second Child 10% Discount.**

NEW FAMILIES:

- Non-Refundable Annual Registration Fee \$50.00
- Post-dated cheques for the 1st of each month. (Sept 2010-June 2011)**
- Parent Agreement
- Fraser Health Registration Form
- Kids in the Grove Registration Form

RETURNING FAMILIES:

- Post-dated cheques for the 1st of each month. (Sept 2010-June 2011)**
- Updated Parent Agreement
- Fraser Health Registration Form
- Kids in the Grove Registration Form