City of Kelowna

Recreation & Cultural Services
1800 Parkinson Way
Kelowna, BC V1Y 4P9
250 469-8800
kelowna.ca

Information Form

Playschool

FORM 1

SECTION 1

PARENTS: This form is to help us provide a safe and enriching environment for preschoolers.
Please complete all sections and return to the instructor on or before the first day of class.
Name of Program: _____

Child's Name:	
Phone:	Date of Birth:
Mother's Name:	
Father's Name:	
Contact in case of emergency:	
Phone:	Cell:

Name of person(s) authorized to pick up your child (including parents):
Child will not be allowed to leave with anyone who is not on this list

Has your child attended preschool classes before? □ YES □ NO
If yes, was it: (a) Parent & child _____ or (b) On their own _____
Would you like to help with any of the activities? □ YES □ NO
Authorization for your child's picture to be taken/used for Recreation & Cultural Services publicity.

Parent/Guardian Signature _____ Date _____

SECTION 2

Doctor's Name:	Phone:
Allergies:	
Disabilities:	
Medications:	

Authorization in case of emergency:

In case of an accident (or serious illness), I authorize Recreation & Cultural Services staff to contact a physician or ambulance if I, or any other specified guardian, cannot be contacted immediately.

Parent/Guardian Signature _____ Date _____

NOTICE OF COLLECTION OF PERSONAL INFORMATION

Personal information on this form is collected under the authority of the Municipal Act, R.S.B.C. 1996, c323 and the Freedom of Information and Protection of Privacy Act, R.S.B.C. 1996, c165 and is necessary for the operation of the City of Kelowna recreation programs and related activities. Questions about the collection of this information are to be directed to the Recreation & Cultural Services Manager, Parkinson Recreation Centre, 1800 Parkinson Way, Kelowna, BC, V1Y 4P9, 250 469-8800