

Vancouver Society of Children's Centres

Child Care Application

(One Application for all VSOCC Centres)

Child:			Date of Birth: / / / / / Year		
	(first name)	(last name)		Birth certificate required for children under 14 months, please attach a copy)	
Parent/Guardian #1:					
<u>-</u>	(first name)	(last name)	-	(relationship to child)	
Phone:				Email:	
(home)	(work)	(mobile)			
Parent/Guardian #2:					
	(first name)	(last name)		(relationship to child)	
Phone:				Email:	
(home) Home	(work)	(mobile)			
Address:					
(apartment nui	mber, street number & name)	(city)		(postal code)	
If you work in the Concord Pa	acific neighbourhood (see mag	o on page 4)			
or in Shaw Tower , please pro	vide your work address :				
Please check the programs you want: Do you have a child currently enrolled in one of					
☐ Under 3: 3 to 36 months			our programs?		
☐ Toddler: 14 to 36 months ☐ 3 to 5: 36 months to school age			∐ Yes (in	dicate which centre)	
☐ Preschool AM: 36 months to school age			Do you have another child on our waitlist?		
☐ Preschool PM: 36 months to school age				☐ Yes ☐ No	
☐ Junior K (Dorothy Lam): 4 years old to school age ☐ Junior K (West Village): 4 years old to school age			VSOCC welcomes children with special needs. Does your child have special needs? □Yes □ No		
School Age: Kindergarten to Grade 7 (must be enrolled at Elsie Roy School)					
School Age: Kindergarten to Grade 7 (must be enrolled at Crosstown			(Please d	escribe)	
School)					
(*See page 3 for hours)					
Note: Children under the age of 3 will automatically be moved to the waitlist					
for the next age group.					
Do you need:					
☐ Full-time ☐ Part-time (2 or 3 days per week) Either full or part-time, whichever is available first					
	Willonever is available first				
What is the earliest date you will accept a space:					
		month/day/year			
It is your res	ponsibility to notify us	s of changes to your conta	act inform	ation or child care needs.	
Forward your completed w to info@vsocc.org or fax		ur office by mail to 200-1362 S	eymour Str	reet, Vancouver, BC, V6B 3P3, by email	
 Parent/Guardian Signatur	re	 Date			
Our Commitment to Privacy: The Vancouver Society of Children's Centres is committed to protecting personal information by following					
responsible information har	•		1124 to prot	oso personal information by following	
For office use only:	F:	C:	C	Date Received	