

TUXEDO COMMUNITY CENTRE FOUR'S MORNING or FOUR/FIVE AFTERNOON PROGRAM

- MORNING 4'S PROGRAM: (3X/WK): MON/WED/FRI 9:00-11:30 A.M. **\$510.00**
- AFTERNOON 4/5'S PROGRAM: (3X/WK): MON/WED/FRI 1:00-3:30 P.M. **\$510.00**
- ADD TUESDAY/THURSDAY 4/5'S AFTERNOONS TO COMPLIMENT YOUR MORNING OR AFTERNOON CHOICE (5X/WK): **\$850.00**

PLEASE NOTE: Children must be 4 on or before December 31,2025

Child's Name _____ Birth Date _____

Parent's Name _____ Phone Number _____

Address _____ Postal Code _____

Email _____

Are you a tuxedo resident? (circle)yes/no

If yes, do you give permission to share email and receive information about community events and activities.
(circle) Yes / /No

COMPLETE & RETURN THE ATTACHED STUDENT PROFILE SHEET, MEDICAL AUTHORIZATION & FUNDRAISING APPROACH

Please select/check one of the 4 options below

*Note must be registered in the Mon/Wed/Fri morning **OR** afternoon program to participate in the Tuesday/Thursday afternoon

1. Mon/Wed/Fri Morning ONLY total cost: \$ 510.00 (4 yr olds only)

\$75.00 non-refundable payment with today's date

\$435.00 balance dated September 7, 2025

\$100.00 Fundraising dated September 15, 2025 (Fill in and return attached fundraising form)

*Lunch program available from **11:30-12:30** for additional cost see application attached

2. Mon/Wed/Fri morning and Tues/Thurs afternoon (5x/wk.) total cost \$ 850.00

\$75.00 non-refundable payment with today's date

\$775.00 balance dated September 7, 2025

\$100.00 Fundraising dated September 15, 2025 (Fill in and return attached fundraising form)

*Lunch program available from **12:00-1:00** for additional cost see application attached

3. Mon/Wed/Fri Afternoon ONLY total cost: \$ 510.00

\$75.00 non-refundable payment with today's date

\$435.00 balance dated September 7, 2025

\$100.00 Fundraising dated September 15, 2025 (Fill in and return attached fundraising form)

*Lunch program available from **12:00-1:00** for additional cost see application attached

4. Monday-Friday Afternoons (Mon-Fri) (5x/wk.) The total cost \$ 850.00

\$75.00 non-refundable payment with today's date

\$775.00 balance dated September 7, 2025

\$100.00 Fundraising dated September 15, 2025 (Fill in and return attached fundraising form)

*Lunch program available from **12:00-1:00** for additional cost see application attached

**All postdated
cheques must
accompany
registration in order
for space to be held**

Cheques payable to
Tuxedo Community
Centre

- Non-Refundable Deposit
- Fees Balance postdated cheque
- Fundraising Bond
- Lunch Program/Form and donation if selected

Do NOT mail applications. Registration forms may be given to any of the Pre-School teachers, or drop off at 274 Queenston St including summer months (mailbox please)

For further information please email preschool@tuxedocc.ca or call 204-896-0959

For Office Use Only

Child currently in TCC Pre-school: yes / no

Tuxedo / Non-Tuxedo Resident

Date received:

Cheque #'s _____ / _____ / _____ / _____

Fundraising (Y) _____ (N) _____ Cheque # _____

Confirmation sent:

FOUR'S LUNCH PROGRAM APPLICATION

(\$7.50/day Donation)

Please complete this form include with registration if you would like to partake in the lunch program.

- 3x/wk.: Monday, Wednesday & Friday 11:30 a.m. – 12:30 p.m. after morning program **\$765.00** donation
- 3x/wk.: Monday, Wednesday & Friday 12:00 -1:00 p.m. before afternoon program **\$765.00** donation
- 2x/wk. Tuesday/Thursday 12:00 -1:00 p.m. before afternoon program starts \$ **510.00 donation**
- 5x/wk. Monday-Friday **\$1275.00** donation

Lunch is not provided. Please pack a nut free lunch for your child.

- Pick Up Required at Ecole Tuxedo Park

All postdated cheques must accompany registration

Cheques payable to Tuxedo Community Center

Please note lunch program space will be prioritized as follows and confirmed by March 16th, 2025

1. Four/ Five afternoon registrants
2. Fours morning registrants

Child's Name _____

Address _____

Postal Code _____

Phone Number _____ E-mail _____

Birth Date _____

Parent's Name _____

Emergency Contact Number: _____

For Office Use Only: Cheque # _____

NOTE: Please complete this form and return it with your registration form and postdated cheques

Child's name _____ Date of Birth _____

Preferred name to be used at school (if different than above)

*CIRCLE 1 ST TO CALL IN EMERGENCY	MOTHER	FATHER
NAME		
HOME PHONE*		
CELL PHONE*		
BUSINESS PHONE*		
EMAIL		
HOME ADDRESS		
POSTAL CODE		
OCCUPATION		
MUST COMPLETE: PARENT/GUARDIAN LOCATION & CONTACT INFO WHILE CHILD ATTENDS PRESCHOOL i.e.: Stay at home, work etc.		

Emergency contact other than parents _____

Emergency contact person's address _____

Relationship _____ Phone _____

Names of person permitted to pick up child from school _____

Does your child have any allergies? _____

Does your child have any medical requirements or need special accommodations? Yes / No

If yes please describe _____

Name of doctor _____ Phone _____

Medical number: registration _____ personal _____

Names and ages of siblings _____

Names and types of pets _____

Are there any custody or court order issues related to the care of your child? _____

Photo/Video for classroom use:

I give permission for photos and/or videotaping of classroom activities for teacher use only? Yes/No

Social Media Consent: (see attached explanation letter)

I give permission to occasionally post a photo or video collection of my child and/or their work on our social media platform page?

Yes/no

I give permission to distribute a class list with my child's name, address, phone # and birth date? (circle) Yes /No

Is there any other information about your child that you want the teachers to be aware of? (Use back if necessary)

NOTE: Please complete this form and return it with your registration form and postdated cheques

Tuxedo Community Centre Preschool
368 Southport Blvd.
Winnipeg, Mb R3P 0S9

Permission for Emergency Medical Transportation and Treatment

If, at any time, medical treatment is necessary due to a serious injury or sudden illness, I authorize the preschool to take whatever emergency measures deemed necessary for the protection of my child while in the care of the preschool facility. I give permission for my child to receive medical attention deemed necessary by my child's doctor or other medical personnel. I understand that this may involve transportation to the hospital in a private vehicle or ambulance. I understand that the preschool will make every attempt to contact me and that any expense incurred for such treatment, including ambulance fees, is my responsibility.

Date

Date

Signature

Signature

Parent Name (please print)

Parent Name (please print)

TUXEDO COMMUNITY CENTRE
FUNDRAISING APPROACH

Dear Parents:

Welcome to the Tuxedo Community Centre Preschool. Your child will make new friends, have fun exploring everything our Preschool has to offer, and develop new skills. Thank you for joining our caring community.

If you are a returning family then you know how special our preschool is – lots of toys and choices for all ages of children, well designed crafts and wonderful teachers and a building that is well maintained and clean.

HELP US TO KEEP THIS TRADITION GOING!

Most organizations find the need to supplement through additional fundraisers and our Preschool is no different.

\$100.00 fundraising bond payable ‘**Tuxedo Community Centre**’
dated September 15, 2025 is attached.

Please note: Fundraising bond is required PER REGISTERED CHILD in a program

YOUR NAME _____

CHILD(S) NAME /PROGRAM(S) _____

Thank you for supporting our Preschool

Tuxedo Preschool Parent Advisory Committee

Social Media: Tuxedo Preschool

‘A place to learn, play and grow.’



Dear Parents and Guardians:

Tuxedo Preschool established a Facebook Instagram presence in 2015, to promote our Preschool to the surrounding community. We would like to continue to use this medium to occasionally highlight classroom events & themes throughout the year. We would like your permission to occasionally post a photo or video collection of your child and/or their work on our Facebook page.

Our guidelines are as follows:

- We will not post names, although names may show on artwork
- Group photos or videos of children will not identify individuals by name
- Tagging will not be permitted

We look forward to sharing our preschool life with you in this manner.

Respectfully,

Liz Dryden
Director

Laura Speziali/Brittnay Moore
Preschool Board Liaison

Christina Tompkins
Administrator