



Application Form

Child's Information	
Child's full name * If applying for unborn child, write Baby & Last Name	Sex <input checked="" type="checkbox"/> m <input type="checkbox"/> f
Birth date or EDD (MM/DD/YY)	Desired start date (MM/DD/YY)
Desired schedule & days (Please see options below)	
<input type="checkbox"/> 5 days a week <input type="checkbox"/> 4 days a week: <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> 3 days a week: <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> 2 days a week: <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	
Parent's Contact Information	
Parent's full name	
Cellular #	Alt. Phone #
Email	

How did you hear about us? _____

What interested you in our Centre? _____

Program Fees			
Schedules	PreK 1/2 Fees	Government Fee Reduction Portion*	Parent Portion
5 days a week	\$1500	- \$900	= \$600
4 days a week	\$1300	- \$720	= \$580
3 days a week *all part-time schedules must include a Monday or a Friday	\$1000	- \$540	= \$460
2 days a week *all part-time schedules must include a Monday or a Friday	\$775	- \$360	= \$415
Schedules	PreK 3/4 Fees	Government Fee Reduction Portion*	Parent Portion
5 days a week	\$1100	- \$545	= \$555
4 days a week	\$925	- \$435	= \$490
3 days a week *all part-time schedules must include a Monday or a Friday	\$725	- \$325	= \$400
2 days a week *all part-time schedules must include a Monday or a Friday	\$525	- \$215	= \$310

*2024 Program Fees

Application Fee Agreement:

There is a \$25 non-refundable application fee, payable by cash, cheque or e-transfer sent to carlabell@headstartpre-k.com, which is required at the time of submitting this application.

- i. The application can be submitted in person, by mail or email, to:

Head Start Pre-Kinder or carlabell@headstartpre-k.com
617 Fourth Ave, New Westminster
V3M 1S5

- ii. Please note, applying does not guarantee a space for your child. Please contact the Manager and inquire about availability and waitlist lengths.
- iii. Upon being offered a space and it being accepted, you will be required to pay a deposit to secure the space.
* The deposits are \$300 for full-time and \$200 for part-time. *More information on the deposit will be provided during registration.*

I, _____, have read and understand the terms of the application fee agreement and abide by its conditions and terms.

Parent Signature

Date signed

Office use only:
<input type="checkbox"/> Application fee received
Date received: _____
Comments: _____

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