

# Lunch Program Registration **DUE: June 30th, 2023**

**Child's Name:** \_\_\_\_\_

Primary Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Manitoba Health Registration # (6 digits) \_\_\_\_\_

Personal Health Identification # (9 digits) \_\_\_\_\_

<b>Parent/Guardian:</b> _____ Address: _____ Home phone: _____ Cell phone: _____ Work phone: _____ Email: _____	<b>Parent/Guardian:</b> _____ Address: _____ Home phone: _____ Cell phone: _____ Work phone: _____ Email: _____
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### Emergency Contacts:

<i>Primary Contact:</i> _____ Address: _____ Home phone: _____ Cell phone: _____ Work phone: _____ Email: _____	<i>Primary Contact:</i> _____ Address: _____ Home phone: _____ Cell phone: _____ Work phone: _____ Email: _____
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### Lunch Program Registration Options:

*Please register my child for (check one):*

\_\_\_\_\_ Full-time (5 days/week)

\_\_\_\_\_ Part-time (circle which days):

Monday      Tuesday      Wednesday      Thursday      Friday

\_\_\_\_\_ Drop in \*Please note that registration form must be submitted prior to child attending drop-in

### Cold Weather

When the weather is too cold to be outside, students may be given a lunch hour option of watching a movie.

**\*\*Note:** Grades 1-3 rated G; Grades 4-6 rated PG. *This is different than the G rating permitted by the Winnipeg School Division.*

Please indicate permission and movie rating below:

\_\_\_\_\_ **YES**, my child may watch movies when offered.

\_\_\_\_\_ **NO**, my child may NOT watch movies when offered.

**Please circle your preference:** G / PG / Both \_\_\_\_\_

**Medical Information:**

1. Allergies: YES/NO (circle)

If yes, provide detailed list:

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2. Does your child have an Epi-Pen for this allergy?

\_\_\_\_\_ Yes \_\_\_\_\_ No

\*\*\*If yes, where is the Epi-Pen located during lunch hour?

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*\*\*\*\*I have applied for the URIS Allergy Notification Program regarding my child's health care plan and I give consent to QSAC staff to access this personal health information through Public Health.*

3. Please list any other health concerns that we should be aware of:

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Parent/Guardian Signature: \_\_\_\_\_

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**Office Use Only:**

Grade

Days

Chq 1

Chq 2

Chq 3

The Queenston School Advisory Council (QSAC) is a parent group dedicated to providing our children with the best possible educational experience through community building, fundraising and advocacy.

Learn more about how you can get involved at [www.winnipegdsd.ca/schools/queenston](http://www.winnipegdsd.ca/schools/queenston)

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