

Lunch Program Copy PLEASE RETURN

ÉCOLE LAURA SECORD SCHOOL
LUNCH PROGRAM
INFORMATION CONSENT

The Lunch Program at École Laura Secord School is a parent council run program and requires consent to communicate with the school about your child. The ability to communicate with the school is an essential tool that promotes safety, ease of program delivery, and an enhanced environment for your child.

Providing your consent for the lunch program and the school to communicate allows such things as being able to obtain current contact numbers if your child is sick or needing to reach you at lunch. It also allows the school to provide the lunch program with class lists, thus enabling your child to have more recess (and less organizational time) at the start of each school year as children are grouped with their respective classrooms.

I request that, and give permission for École Laura Secord School to release and exchange information to the Lunch Program about my child(ren):

Names of Children: _____

Name of Parent/Gaurdian

Date

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Behaviour Contract

Behaviour Expectations:

1. I will follow all the rules set out by the lunch program, and listen to all lunch program staff
2. I will be respectful of all staff and adults at all times during lunch time
3. I will follow the Winnipeg School Division "Code of Conduct" at all times
4. I will make sure my eating area is clean of all garbage when I have finished my lunch
5. I will adhere to the Anti-Bullying Policy

Privileges for meeting the conditions of the contract:

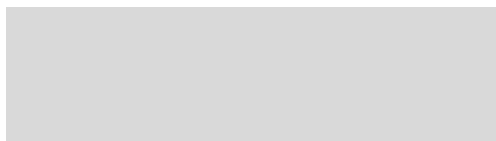
1. Special prizes, rewards and outdoor lunch days.

Consequences/Restrictions for failing to meet the conditions of the contract:

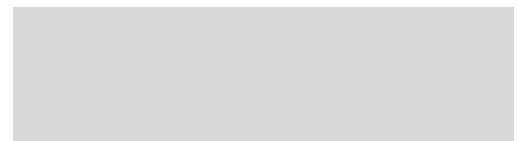
1. Time out
2. Missing lunch time recess and/or communication with parents/guardians will be made
3. Based on the seriousness behaviour plan may be put in place, including the possibility suspension from the Lunch Program, as set out by the Behaviour Plan.

I understand that I must meet all Behaviour Expectations as listed above in order to earn my privileges each day. Failure to meet the Behaviour Expectations listed above will result in my earning of any of consequences/restrictions listed above.

Privileges and Consequences/Restrictions will be earned on the same/following day.



Child's Signature



Parent's Signature

If you have more than one child, please have all signatures on this sheet.

Please read this over with your child/children and send back to the office by June 12th, 2023.

École Laura Secord School- Parent Lunch Program
960 Wolseley Avenue, Winnipeg, MB

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Student Registration Form 2023-2024

Please complete both sides.

1. Surname: _____
First name: _____
Address: _____
Postal Code: _____
MHSC: Family #: _____ Individual #: _____

*Allergies/Concerns (please circle) Epi-Pen **Y N** Asthma Inhaler **Y N**

2. Surname: _____
First name: _____
Address: _____
Postal Code: _____
MHSC: Family #: _____ Individual #: _____

*Allergies/Concerns (please circle) Epi-Pen **Y N** Asthma Inhaler **Y N**

3. Surname: _____
First name: _____
Address: _____
Postal Code: _____
MHSC: Family #: _____ Individual #: _____

*Allergies/Concerns (please circle) Epi-Pen **Y N** Asthma Inhaler **Y N**

Please ensure that we have a Health Plan on file if your child has ANY medical concerns. You may request a form

Please provide any additional information if applicable:

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PARENT/GUARDIAN CONTACT INFORMATION:

Parent/Guardian #1:

Name _____

Address & Postal Code (if different)

Phone #'s:

Home: _____

Work: _____

Cell: _____

Email: _____

Parent/Guardian #2:

Name _____

Address & Postal Code (if different):

Phone #'s:

Home: _____

Work: _____

Cell: _____

Email: _____

EMERGENCY CONTACT:

Name: _____

Relationship to child: _____

Phone Number(s): 1. _____

2. _____

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1. Does your child require additional assistance during the lunch hour (i.e. physical, emotional or behavioural support)?

2. Is there any information you feel the Lunch Program Staff need to know about your child?

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Fees and Payment Options

LUNCH PROGRAM FEES - DUE ON A MONTHLY BASIS

1 student Full Time (3/days a week or more) \$40/mo \$400/year
2 students Full Time \$66/mo \$660/year
3 students Full time \$88/mo \$880/year
4 Students Full Time \$110/mo \$1100/year

PART TIME (2 days a week or less) \$23/mo \$230/year

PAYMENT OPTIONS

- Automatic Withdrawal - Void cheque needed with a date specified as per the following: 1st or 21st
- Cheque or Money Order made out to LSSPLP dated for the 1st or 21st
- E-transfers can be sent to LSLunchProgram@gmail.com (**Please put student's name in the memo line**)

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Registration Form Checklist

When returning the Lunch Program Registration Form, be sure the following is filled out and signed:

- Information Consent Form
- Behaviour Contract
- Student information- including emergency contact and other pertinent information
- Family contact information-include a legible email address
- Choice of Monthly payment options-payment should be included with registration.
 - This must include cheque (made payable to LSSPLP)
 - “VOID” cheque for Automatic Withdrawal (date of withdrawal written on the “VOID” cheque)
 - Indication of choice to pay by e transfer

If any of the above information is not signed or filled out, your registration will be considered incomplete and your child/children will not be considered registered until all information/forms are signed/filled out properly and is received by the lunch program.

If you have any questions regarding registration or payment options please email:

Director, Pam Garychuk garychukpamela@gmail.com

Thank you,

