



www.stalbertnatureschool.ca
stalbertnatureschool@gmail.com

St. Albert Nature School Preschool Registration Package 2026/2027



www.stalbertnatureschool.ca
stalbertnatureschool@gmail.com

Welcome to St. Albert Nature School!

In order for your registration to be considered complete, please ensure the following:

- 1) this registration form is completed**
- 2) permission forms are signed**
- 3) Payment of non-refundable registration fee (\$150) and first month's tuition (\$95 for 2 days/week OR \$125 for 3 days/week) *These are the parent portion of fees after the Government Affordability Grant has been applied.**

PLEASE READ FORM CAREFULLY

Welcome to St. Albert Nature School Registration. We provide an opportunity for physical, social, emotional and cognitive growth in a positive outdoor learning environment.

Please see below for amounts and fee schedule. If you decide to withdraw your child from St. Albert Nature School, you need to notify us in writing by August 1, 2026. If notice is not provided, you are responsible for the registration fee and first month's fees.

*COMPLETED registration forms are processed in the order in which they are received.

*Remainder of fees are due by Oct 1, 2026. Please see below for fee payment options.

*Cheques should be made out to St. Albert Nature School.

*We will be holding a certain number of spots for both boys and girls in our class. A waitlist will be started once these numbers have been reached.

We will confirm your registration status upon receipt of your application. In August, we will provide you with a start up information package.

We look forward to seeing you and your child in September and welcoming you to Nature School. If you have any questions, please email us at stalbertnatureschool@gmail.com.

Yours Truly,

Nicole Tomas and Lori Waters-Sim
Owners/Operators
St. Albert Nature School



Fee Structure and Class Information

Our school year will start with a staggered entry in September and runs until June 2027.
There are NO CLASSES IN DECEMBER.

***Please Note:** All fees have been reduced to reflect the Government of Alberta child care subsidy affordability grant.

AM 3 Year Old Class- (*Students must be 3 by their first day of attendance)

OWLS: Tuesday/Thursday mornings from 9:30-11:30am OR

SQUIRRELS: Tuesday/Thursday mornings from 9:45-11:45am

Fees: \$95 per month

Non-refundable registration fee (\$150) due at the time of registration

AM 4 Year Old Class- ACORNS (*Students must be 4 by December 31, 2026)

Monday/Wednesday/Friday mornings from 9:30-11:30am

Fees: \$125 per month

Non-refundable registration fee (\$150) due at the time of registration

PM 4 Year Old Class- BUNNIES (*Students must be 4 by December 31, 2026)

Tuesday/Wednesday/Thursday afternoons from 12:30-2:30

Fees: \$125/month

Non-refundable registration fee (\$150) due at the time of registration

***Payment Options for Preschool Classes:**

- 1) Monthly post dated cheques (due by October 1st for the year)
- 2) E-transfer to stalbertnatureschool@gmail.com in 3 installments by Oct.1 (for Oct. and Nov.), by Dec.1 (for Jan., Feb. and March) and April 1 (for Apr., May and June) with the password "nature". One annual payment for the remainder of the year can be paid by Oct. 1.

*If at any time you decide to withdraw from St. Albert Nature School, 30 days written notice is required prior to the 1st of the following month. If 30 days notice is not given, you are responsible for the following month's tuition fees.



St. Albert Nature School- Registration Form

Please indicate which class you are registering for:

Tuesday/Thursday 3 year old morning class: OWLS 9:30-11:30 am

SQUIRRELS 9:45-11:45 am

☐
☐

Monday/Wednesday/Friday 4 year old morning class: ACORNS 9:30-11:30am

☐

Tuesday/Wednesday/Thursday 4 year old afternoon class: BUNNIES 12:30-2:30p

☐

****Please indicate your 1st and 2nd choice. If no second choice is indicated and your first choice is unavailable, you will be placed on a waitlist for your first choice class.**

CHILD INFORMATION		CHILDS DATE OF BIRTH (DD/MM/YYYY)		
CHILD'S LAST NAME	CHILDS FIRST NAME	CHILD'S MIDDLE NAME	M	F
ADDRESS			POSTAL CODE	
PARENT/GUARDIAN		HOME NUMBER		
ADDRESS (if different than childs)		CELL NUMBER		
OCCUPATION		WORK NUMBER		
PARENT/GUARDIAN		HOME NUMBER		
ADDRESS (if different than childs)		CELL NUMBER		
OCCUPATION		WORK NUMBER		
CONTACT EMAIL ADDRESS OR ADDRESSES (for class notices)				

EMERGENCY CONTACTS (other than parent/guardian)		
FULL NAME	RELATIONSHIP TO CHILD	PHONE NUMBER
ADDRESS		ALTERNATE PHONE NUMBER
FULL NAME	RELATIONSHIP TO CHILD	PHONE NUMBER
ADDRESS		ALTERNATE PHONE NUMBER



PERSON(S) AUTHORIZED TO PICK UP CHILD (other than parent/guardian)		
FULL NAME	RELATIONSHIP TO CHILD	PHONE NUMBER
FULL NAME	RELATIONSHIP TO CHILD	PHONE NUMBER

HEALTH INFORMATION		
ALBERTA HEALTH CARE NUMBER	FAMILY DOCTOR	
ADDRESS	PHONE NUMBER	
DOES THIS CHILD HAVE ANY ALLERGIES?	YES	NO
(if YES, please list and explain)		
HAS THIS CHILD BEEN IMMUNIZED?	YES	NO
HAS THIS CHILD HAD ANY MEDICAL OR EMOTIONAL CONDITIONS THAT HAVE REQUIRED INTERVENTION OR TREATMENT?	YES	NO
(if YES, please explain)		
IS THIS CHILD ON ANY REGULAR MEDICATIONS AT HOME?	YES	NO
(if YES, please list)		

CHILD'S CHARACTERISTICS
PLEASE TELL US ANYTHING ELSE YOU WOULD LIKE TO ABOUT YOUR CHILD THAT MAY HELP OUR TEACHERS WELCOME THEM TO THEIR CLASS.



HOW DID YOU HEAR ABOUT US?

--

TERMS OF PAYMENT

There is a \$150 non-refundable one-time registration fee per child. The first month's payment of \$95 (2 day/week class)/ \$125 (3 day/week class) or the fall term fee of \$285 (2 day/week class)/ \$375 (3 day/week class) is due upon registration and to be post dated August 1, 2026 (if paying by cheque). Written notice must be provided by August 1, 2026 if you would like to withdraw your child from St. Albert Nature School. One month's written notice to St. Albert Nature School is required **prior to the first of the next month** before withdrawing your child from our program. If one month's notice from the 1st of the next month is not provided, you will be responsible for that month's fee. All remaining fees must be paid by post-dated cheques by October 1, 2026 OR 3 e-transfer installments on Oct.1, Dec.1 and April 1 OR a one-time payment by October 1, 2026.

Initials

IMAGE RELEASE

We will be taking photos of our students at the beginning of the year (for our school records) and throughout the year to highlight the activities in which our students are participating. Some of these photos may be used for our school website or social media pages. If you would prefer your child's picture NOT be used, please indicate this below.

I, _____, give permission to St. Albert Nature School to take photos of my child, _____, for use:

In St. Albert Nature School Records- we create a portable record with your child's picture that is kept for emergency purposes only.

In monthly newsletter/calendars- these are only sent to the other families in your child's class.

On St. Albert Nature Schools webpage, social media or for other advertising purposes

Parent/Guardian Signature: _____

Date: _____

Yes / No

Yes / No

Yes/ No



MANAGEMENT POLICY

- The guidelines for discipline within our preschool are as follows.
Set up clear, easy to understand expectations. Repeat them as many times as necessary throughout the year.
- Reinforce positively when a child is following an expectation by describing what you see. Example: "I see you remembered to throw the trash in the can. Good for you!"
- When a negative behavior occurs: First: State the positive expectation ("blocks are for building"); Second: If you see the child is not interested in what he or she is doing or doesn't feel like doing it, help the child find something else to do.
- If the child's behavior is harmful to others, try the above step first. If that doesn't work, stay with the child (children) and model good play techniques. Play with the child or children.
- Speak privately with a child who needs some guidance and attention and explain expectations.
- Help the children problem solve with each other. Facilitate and stay close by as children get back into a play situation. Observe. Time aside with a child may be necessary for a few minutes if behavior continues.
- Quiet time may be needed. Child will be directed to a quiet area and explained that they are welcome to return to activities when they feel they are ready to play in an appropriate manner.
- If negative behaviors continue and the above steps are not working, call for a parent conference to discuss the child and negative situations that occur frequently. Work with the parents for the benefit of the child.
- If negative behavior still continues, the teacher will call another conference with the parents to discuss the problems and seek further solutions.
- If the child is harming other children continuously, we may ask that the parent attend school with his or her child until we feel the problem has subsided.
- If the general atmosphere of the classroom is continually disrupted by a particular child after all steps are taken; or the Director feels the preschool is not meeting the needs of a particular child, the Director reserves the right to no longer have the child attend the preschool.

I have read and agree to the terms outlined in the Discipline Policies for St. Albert Nature School's Preschool Program.

Initials



ILLNESS POLICY

If the following symptoms are observed in a child at St. Albert Nature School, steps will be taken by the staff to have the child removed from the program:

- vomiting, having a fever (a temperature over 38°C or 100°F), diarrhea, a new or unexplained rash, severe coughing, difficult or rapid breathing, yellowish skin or eyes or pink eyes.
- a child who requires greater care and attention than can be provided without compromising the care of the other children in the program
- a child who has or displays any other illness or symptom the staff member knows or believes may indicate that the child poses a health risk to persons on the program premises.

In the event that a parent is unable to arrange for the immediate removal of a child, employees will ensure supervised care for the child in a space separate from other children until the child can be removed from the facility.

Parents will be advised to keep the child at home until the child's condition improves OR parent has a physician's note saying that the child no longer poses a health risk to other people on the program premises.

I have read and agree to the terms outlined in the Illness Policies for St. Albert Nature School's Preschool Program.

Initials



CONSENT TO COLLECT, USE AND SHARE INFORMATION WITH GOVERNMENT OF ALBERTA FOR CHILD CARE PURPOSES

Under the Early Learning and Child Care Act and Regulation, as well as the Affordability Grant Agreement, licensed child care programs must share information about enrolled children with the government. The Child Care Accountability Program, established in March 2025, helps fulfill the government's responsibility for the safety and well-being of children in licensed child care programs while ensuring Alberta's child care system is financially accountable. The Program allows for the creation of a child care participant number (CCPN) for every child in a licensed child care program using information that parents/guardians already provide upon enrollment.

The CCPN is similar to a student number and will help ensure the safety and well-being of children while improving financial accountability and transparency around how government funding is used. Each child's CCPN will be created using personal information already collected by child care providers during the registration process, which is made available to the government through child care providers. The CCPN will be used as a basis for government to pay child care providers for the children registered in their programs and will also be tied to the licensing requirements for all children attending a licensed child care program in Alberta, including out-of-school care programs.

By agreeing below you give St. Albert Nature School your consent to collect, use and share this information with the government to provide child care services.

I have read and agree to the terms outlined in the Consent to Collect, Use and Share Information with the Government of Alberta for St. Albert Nature School's Preschool Program.

Initials

PARENT/GUARDIAN SIGNATURE

DATE



CONSENT FOR EMERGENCY MEDICAL TREATMENT

If your child needs emergency medical care and you aren't available to give formal consent to medical authorities, care may be unnecessarily delayed. To protect your child, complete the EMERGENCY CONSENT FORM below and return to the St. Albert Nature School. In the event of a medical emergency, the form will accompany your child to the hospital/clinic so that medical treatment can be rendered.

I/we hereby give consent for all medical treatment that may be required for our child during our absence:

Child's Name: _____ Date of Birth: _____

Allergies: _____

Other Information: _____

Physician: _____ Phone #: _____

AB Health Care #: _____

Family Contact Information

Parent/Guardian Name: _____

Phone #1: _____ Phone #2: _____

Parent/Guardian Name: _____

Phone #1: _____ Phone #2: _____

Alternate Emergency Contact: _____

Phone #1: _____ Phone #2: _____

Signature of Parent/Guardian: _____ **Date:** _____

Signature of Parent/Guardian: _____ **Date:** _____



General Off-Site Permission Form

Parent/Guardian Permission for Student Participation

We are the parents or legal guardians of _____ (the “Participant”) and we hereby give consent and permission for the Participant to attend and participate in the following daily activities offered by St. Albert Nature School during the 2026-2027 school year.

Description of Proposed Off-Site Activities (the “Activities”): Walking trips through the Red Willow Trail System, trips to the St. Albert Botanic Gardens, visiting the Sturgeon River, use of all SAMBA grounds (SAMBA site)

Proposed Itinerary (including method of transportation): Daily activities at St. Albert Nature School may include visiting a variety of locations surrounding our classroom. All trips will be done on foot and within the time frame of class hours.

Cost to Student (if any): NONE

In consideration of the Participant being permitted to participate in, or attend and observe the Activities, we agree and acknowledge for ourselves, on behalf of the Participant and for the Participant’s personal representatives, heirs, estate, executors and next of kin that:

1. We are aware that participating in, or attending and observing the Activities can involve hazards and risks of loss or damage to personal property, personal injury, illness or death and that these risks and hazards may include but are not limited to falling, slipping, colliding with and being struck by objects, acts of other participants (including from the failure of other participants to follow instructions), manufacturers defects or malfunctions in equipment, weather conditions (including unforeseen, inclement or intemperate weather), consumption of food and drink, first aid, emergency treatment or other services provided.
2. We acknowledge that hazards and risks are inherent to the Activities and eliminating the hazards and risks would compromise the unique character of the St. Albert Nature School experience. We acknowledge that the Participant’s participation in all such Activities, as well as attending and observing the Activities, is voluntary knowing of these hazards and risks and the Participant is participating or attending and observing at our risk and his/her own risk.
3. We acknowledge and agree that we and the Participant are freely and voluntarily assuming any and all hazards and risks arising from the Participant’s participation in the Activities, or arising from his/her attendance and observation of the Activities.



4. St. Albert Nature School and any and all of its officers, directors, employees and volunteers (including without limitation Lori Waters-Sim and Nicole Tomas), and their respective personal representatives, estates, heirs and next of kin (collectively the “Releasees”) are not responsible for any property loss or damage, personal injury, illness or death, however caused, arising from the Participant’s participation in the Activities, or arising from his/her attendance and observation of the Activities.

5. On our own behalf and on behalf of the Participant and on behalf of his/her personal representatives, heirs, estate and next of kin we, through our guardianship and agency hereby remise, release, discharge, waive, indemnify and save harmless the Releasees and each of them from any and all liability, costs (including without limitation legal costs), claims, damages, demands, actions and causes of actions at law, by statute and/or in equity arising as a result of any property loss or damage, personal injury or death suffered by the Participant as a direct or indirect result of, or howsoever in connection with, participating in, or attending and observing the Activities.

6. We understand that by signing this document we are giving up certain legal rights, including the right to sue if the Participant is injured and that the Participant is also giving up these legal rights. We understand that the Participant will be forever precluded from suing or otherwise claiming against the Releasees or any of them for any property loss or damage, personal injury or death that the Participant may sustain through or in connection with participating in, or attending and observing the Activities, and that any such claims on the Participant’s behalf made by us or by any other parties will also be precluded.

7. This document is intended to be as broad and inclusive as is permitted by the laws of the Province of Alberta, and if any portion of this document is held invalid, the balance shall continue in full legal force and effect.

We hereby acknowledge that we have read this document and agree and consent to all terms and conditions set out herein on our own behalf and on behalf of the Participant. We do not rely on any oral or written statements or assurances made by St. Albert Nature School or its staff other than as set out in this document.

DATED this _____ day of _____, 20____.

Name of Parent or Legal Guardian
(Please print)

Signature of Parent or Legal Guardian

Name of Parent or Legal Guardian
(Please print)

Signature of Parent or Legal Guardian



PARENT/GUARDIAN RELEASE, WAIVER OF CLAIM, INDEMNITY AND ACKNOWLEDGMENT OF RISK

**READ THIS DOCUMENT CAREFULLY. IF YOU DO NOT UNDERSTAND THIS DOCUMENT,
PLEASE ASK FOR ASSISTANCE PRIOR TO SIGNING.**

We are the parents or legal guardians of _____ (the "Participant"). We consent to and provide permission to the Participant to participate in and/or attend and observe certain activities, including outdoor educational activities, exploration of natural areas, physical education, consumption of food and drinks and related activities, (collectively the "Activities") offered by the St. Albert Nature School and its staff.

In consideration of the Participant being permitted to participate in, or attend and observe the Activities, we agree and acknowledge for ourselves, on behalf of the Participant and for the Participant's personal representatives, heirs, estate, executors and next of kin that:

1. We are aware that participating in, or attending and observing the Activities can involve hazards and risks of loss or damage to personal property, personal injury, illness or death and that these risks and hazards may include but are not limited to falling, slipping, colliding with and being struck by objects, acts of other participants (including from the failure of other participants to follow instructions), manufacturer's defects or malfunctions in equipment, weather conditions (including unforeseen, inclement or intemperate weather), consumption of food and drink, first aid, emergency treatment or other services provided.
2. We acknowledge that hazards and risks are inherent to the Activities and eliminating the hazards and risks would compromise the unique character of the St. Albert Nature School experience. We acknowledge that the Participant's participation in all such Activities, as well as attending and observing the Activities, is voluntary knowing of these hazards and risks and the Participant is participating or attending and observing at our risk and his/her own risk.
3. We acknowledge and agree that we and the Participant are freely and voluntarily assuming any and all hazards and risks arising from the Participant's participation in the Activities, or arising from his/her attendance and observation of the Activities.
4. St. Albert Nature School and any and all of its officers, directors, employees and volunteers (including without limitation Lori Waters-Sim and Nicole Tomas), and their respective personal representatives, estates, heirs and next of kin (collectively the "Releasees") are not responsible for any property loss or damage, personal injury, illness or death, however caused, arising from the Participant's participation in, or attendance and observation of the Activities, including without



limitation negligence or gross negligence on the part of any of the Releasees, breach of contract, occupier's liability or any other tort or cause of action at common law, in equity or by statute.

5. On our own behalf and on behalf of the Participant and on behalf of his/her personal representatives, heirs, estate and next of kin we, through our guardianship and agency hereby remise, release, discharge, waive, indemnify and save harmless the Releasees and each of them from any and all liability, costs (including without limitation legal costs), claims, damages, demands, actions and causes of actions at law, by statute and/or in equity arising as a result of any property loss or damage, personal injury or death suffered by the Participant as a direct or indirect result of, or howsoever in connection with, participating in, or attending and observing the Activities.

6. We understand that by signing this document we are giving up certain legal rights, including the right to sue if the Participant is injured and that the Participant is also giving up these legal rights. We understand that the Participant will be forever precluded from suing or otherwise claiming against the Releasees or any of them for any property loss or damage, personal injury or death that the Participant may sustain through or in connection with participating in, or attending and observing the Activities, and that any such claims on the Participant's behalf made by us or by any other parties will also be precluded.

7. This document is intended to be as broad and inclusive as is permitted by the laws of the Province of Alberta, and if any portion of this document is held invalid, the balance shall continue in full legal force and effect.

We hereby acknowledge that we have read this document and agree and consent to all terms and conditions set out herein on our own behalf and on behalf of the Participant. We do not rely on any oral or written statements or assurances made by St. Albert Nature School or its staff other than as set out in this document.

DATED this ____ day of _____, 202__.

Name of Parent or Legal Guardian Signature of Parent or Legal Guardian
(Please print)

Name of Parent or Legal Guardian Signature of Parent or Legal Guardian
(Please print)