

AP 336-1 School Registration Form for Elementary & Middle School

A child may only be registered in one school in the Abbotsford School District. In the case of a family registering with multiple children please use one form per child.

Catchment School _____

Requested Out-of-Catchment or District Program/Placed School _____

STUDENT INFORMATION

Gender Identity M=male, F=female, X=nonbinary _____

Legal Last Name _____ Legal First Name _____

Usual Last Name _____ Preferred First Name _____

Legal Middle Name _____ No Middle Name

Birth Date _____ (DD/Month/YYYY e.g. 24 May 2005)

Grade _____ Proof of Age Birth Certificate Passport Citizenship Paper

Home Phone _____

ADDRESS INFORMATION

Street Address _____

City _____ Prov. _____ Postal Code _____

Proof of Residence Provided Yes No (*see below)

Mailing Address (if different from above) _____

City _____ Prov. _____ Postal Code _____

* In order for a child to be registered in an Abbotsford school, evidence of guardianship and proof of residency must be provided. These documents include photo identification of the parent/legal guardian, evidence of guardianship as shown on the child's long-form birth certificate or another legal document, and the child's birth certificate. Evidence of residency is required by providing one primary source and one secondary source reflecting the parent/legal guardian's name and address as per Administrative Procedure, Section 2. Primary sources must be current-dated documents that include utility/electricity bills, Canada Revenue Agency documents, and BC Medical Services Plan invoice/statement. Secondary sources must be current-dated documents that include: internet service for the address, Subject-Free Home Purchase contract, Insurance statements/policies, Health documents (medical reports or letters), Employment pay slips

The principal of a school may request a properly sworn Statutory Declaration from the enrolling parent or legal guardian attesting that the student's principal place of residence is the place indicated in this application. Applicants should note that making a false statutory declaration may constitute the criminal offense of perjury, contrary to Section 131 of the Canadian Criminal Code and will result in the school principal repealing the student's placement.

ADMISSION INFORMATION

Previous School _____

City & Province _____

Date left previous school _____ Expected start date _____

FOR KINDERGARTEN REGISTRATION ONLYAttended Preschool Yes No Attended Daycare Yes No Attended StrongStart Yes No

Previous School _____ City/Prov. _____

BUSSING (does not apply for District Programs)Is bussing needed Yes NoIf Yes, please register online at: <https://www.awinfosys.com/das/sd34/public/BussingRegistrationNew.asp>**INDIGENOUS ANCESTRY INFORMATION** Yes No If yes, Inuit Metis First Nation Non-Status First Nation Status on Reserve First Nation Status off Reserve

Band Name _____

PROGRAM French Immersion ELL Special Education *Designation *My child has an IEP *Was in an Alternate Program (title) _____**SUPPORT NEEDS**Does this student require additional supports for social and emotional needs? Yes NoDoes this student require additional supports? Yes NoIf yes, Behaviour intervention plan Safety plan

**This information will only be used to initiate a dialogue between the family and the school with the aim of better supporting the student and the family with a goal of successful transition to the school district.*

IMMIGRATION/CITIZENSHIP STATUS

Country of Birth _____ Language at Home _____

Canadian Citizen Child Parent • Permanent Resident/Landed Immigrant Child ParentRefugee Child Parent • International Student (funding not eligible) Child ParentStudent Visa Child Parent • Employment Authorization Child Parent**PARENTS/GUARDIANS**

1. Last Name _____ First Name _____

Relationship to Student _____

Living with Student Yes No Same Address as Student Yes No

Address _____

Home Phone _____ Cell _____

Work Phone _____ Ext. _____ Email _____

Employed at _____

2. Last Name _____ First Name _____

Relationship to Student _____

Living with Student Yes No Same Address as Student Yes No

Address _____

Home Phone _____ Cell _____

Work Phone _____ Ext. _____ Email _____

Employed at _____

Are there any legal documents in force re: custody/guardianship/access? Yes No

Have you provided a copy of these legal documents to the school? Yes No

Comments/details re submitted court order _____

*Please note that court orders cannot be followed or acted upon by the school unless a copy has been formally submitted to the school.

SIBLING INFORMATION (brothers/sisters including preschoolers in the same or a different school within the Abbotsford School District)

	Sibling 1	Sibling 2	Sibling 3
Last Name			
First Name			
Relationship			
School			
DOB			
Sex (Male/Female)			

CONTACT INFORMATION (other than parent/guardian)

1. Last Name _____ First Name _____
 Relationship _____ Cell _____
 Home _____ Work _____ Ext. _____
 2. Last Name _____ First Name _____
 Relationship _____ Cell _____
 Home _____ Work _____ Ext. _____

OUT OF PROVINCE CONTACT INFORMATION (In case of Provincial disaster)

Last Name _____ First Name _____
 Relationship _____ Cell _____
 Home _____ Work _____ Ext. _____

MEDICAL INFORMATION

Doctor Name _____ Phone _____
 Care Card Number _____
 Allergies and Conditions _____
 Are any of these conditions life threatening? Yes No If so, which? _____
 Life Threatening Conditions/Medication or Treatment Required:

Condition _____ Treatment _____

(AP 323 – Support for Students with Type One Diabetes, AP 327 – Medical Alert Conditions, AP 328 – Administration of Medication to Students, and AP 330 – Allergic Shock (Anaphylaxis). Copies are available at the school office or on the District website.

Name (printed) _____ Signature (parent/guardian) _____

STUDENT INFORMATION RELEASE

In accordance with the Freedom of Information and Protections of Privacy Act, Abbotsford School District requires consent to use personal information for purposes unrelated to educational programs. Please sign for each item below if you authorize disclosure as described.

1. GRADE 8-12 STUDENTS ONLY

All students participating in secondary athletics in Abbotsford need to be registered with BC School Sports. I authorize disclosure of my child's name, birthdate, current grade, the year my child entered grade 8 and previous school to BC School Sports for registration purposes.

Signature _____

2. COMPUTER AND INTERNET USAGE AND ACCESS

Access to and participation in the global network (Internet) carries with it a responsibility for adherence to established guidelines for acceptable use, as per AP 334 – Online Communications and Digital Learning.

Parents are responsible for ensuring that they fully understand the terms and conditions of the procedures for the safe use of the Internet. I will review this policy and expectations with my child

Signature _____

3. CANADA ANTI-SPAM LEGISLATION (CASL) COMPLIANCE FORM

To ensure that you consent to receive electronic newsletters, school and community updates on matters from your children's school(s) and the school district, please complete the accompanying Canada Anti-Spam Legislation (CASL) Compliance Form. (AP 336-2 Request for Email Address Consent)

4. PHOTOGRAPH/VIDEO AND MEDIA CONSENT FORM

To give your consent to the Abbotsford School District to collect, use, and publicly disclose your child's name, voice and/or image for purposes consistent with AP 324, please complete form AP 324-1 Photograph/Video and Media Consent Form.

Parents/Guardians: You can also register for School Cash Online, and have the convenient and secure option of paying for school items using a credit card online, 24/7. You can pay for school items such as trips, club/athletic fees and spirit wear. For online payments please register at <https://abbotsford.schoolcashonline.com> (it takes less than five minutes)

Office Use Only

Date Rec'd _____ Time Rec'd _____

Received By _____ Computer User Agreement Rec'd Yes No

School Entry Date _____ PEN _____ MyBCEd# _____

This personal information is being collected under the authority of the Freedom of Information and Protection of Privacy Act and the School Act for the purposes of administering educational services. Questions about the collection of personal information may be directed to the Freedom of Information Coordinator, District Administration Office, 604-859-489

Instructions to Complete this Form

1. ONLY custodial parent(s) or guardian(s) may complete and submit this form.
 - In the event of a serious emergency, via this form you are authorizing school staff to release your child(ren) to the custody of the individual(s) listed on the other side of this form
 - The school may in the event of a serious emergency release your child to medical/response personnel as necessary.
2. Please complete all sections of this form except the shaded areas (including the bottom section).
 - **Important:** Please leave the shaded areas blank
3. Complete 1 form for each SCHOOL that your children attend.
 - For example: If you have children in elementary school and secondary school, you will complete 2 forms.
4. Please DO NOT tear or remove the bottom of this form.
5. Fill in the names of parent(s)/guardian(s) or authorized others as they appear on their identification.
6. Return the completed form to the school.
7. Inform EVERY authorized person you have listed that they are to pick-up your child(ren) at the school in the event of a significant emergency, such as a damaging earthquake. Share with them the school's processes and your family's emergency plan in the event of a major disaster.

Additional Information

Emergency Reunification Background

In the rare event of a significant emergency or disaster, the school may use its emergency student reunification process.

Examples of disasters where emergency student reunification may be used include but are not limited to:

- A major locally damaging earthquake,
- Overland flooding, or
- Other life-threatening regional or school emergencies.

Additional People Authorized to Pick-Up Students

While we don't like to contemplate it, during major emergencies some parent(s)/guardian(s) may not be able to get to the school to pick-up their child(ren), either because they are unable, or roads/bridges are blocked. Therefore, all parent(s)/guardian(s) are encouraged to authorize 3 additional adults to pick-up their child(ren) in the event of a major emergency, such as a damaging earthquake. When considering authorizing these people, they ideally should be:

- An adult (over 19 years of age).
- A trusted individual, such as a close friend, family member, or neighbour.
- Physically able to travel to the school despite some obstacles in the community.
- Located near the school during much of the school day (on average).
- Able to speak English (Optional: An asset post-disaster as translators will likely be limited).

****Those authorized to pick up students will require a piece of identification upon arrival at the school. ****

Out of Region Contact

This is a trusted adult who resides outside of the area impacted by the disaster; typically, someone who lives outside of Metro Vancouver. They can be important as a central contact for all members of your family following a major disaster, such as an earthquake. It is an asset for this person to be competent using computers and technology and to be live within Canada.

This email contains important information.
Please have it translated.

ایس ہائیل ویچ مہمیت پرکن جا ہوئی ہے
کیونکہ اس کا انتساب مکمل مدرسہ طبقہ۔ پڑھ کر جمع کر دیں۔

يحتوي هذا المستند على معلومات مهمة حول مدرسة طبلة. يرجى ترجمتها.

매우 중요한 공지문이니, 반드시 번역하여 내용을 숙지하십시오.

Hãy dịch nó sang tiếng Việt. Đây là một thông báo quan trọng.

Este documento contiene información importante sobre la escuela de su hijo/a. Régale traducir por favor.



Please read instructions on reverse side.

Student Reunification Release Form - Elementary/Middle

School:

Year:

Release Information:

List of your children at this school (oldest to youngest)

First Name	Last Name	Grade

Parent(s)/Legal Guardian(s)

Name (First, Last)	Home Phone	Cell Phone	Email

Additional people authorized to pick up student(s)

Name (First, Last)	Home Phone	Cell Phone	Email

Out of Region Contact Person (within Canada)

Name:

Email:

Home Phone:

Cell Phone:

Province:

Office Use Only - Release Confirmation

Picture ID:

Confirmed

Not Available

Identification confirmed by staff

Destination:

Time:

Staff Initial:

Parent/Guardian/Designate Signature: X

Please complete unshaded areas. Do not tear or remove this section.

Student Release List:

First Name	Last Name	Grade

Released

<input type="checkbox"/>	Yes

1) Proceed to gate/table: _____

2) Show this form to the staff member at the gate/table

3) The staff member will locate the student(s) and bring them to you

4) Once you have the student(s), please exit the school grounds

Release Teacher Initials: _____

Child's Name _____ Grade _____

The following information will provide us insight into your child and how we can best support him/her/them at school. All questions are optional.

How old was your child when they began **speaking**? _____

Were there any concerns about your child meeting their developmental **milestones**?

Yes No _____

Has your child had a **hearing** screening? Yes No Any concerns? _____

Does your child have frequent **ear infections** (current or in the past)? Yes No

Does your child **snore**? Yes No

Has your child had a recent **vision** check? Yes No Any concerns? _____

Were there any concerns with the following:

Difficult pregnancy? Yes No

Premature birth? Yes No

Low birth weight? Yes No

Seizures? Yes No (Please describe _____)

Allergies? Yes No (Please describe _____)

Medical diagnoses? _____

Family medical/mental health/learning challenges? _____

Is your child able to sit and **listen to a story/read** for 5-10 minutes? Yes No

Does your child have difficulty **sleeping** through the night? Yes No

Does your child display **behaviour** that may be a concern in the classroom? Yes No

Please describe _____

School Services

Does your child have a Ministry of Education **IEP**? Yes No **Category** _____

Has your child accessed any of the following **services** at school:

____ Speech and Language

____ Indigenous Education

____ Counselling

____ English as an Additional Language

____ Learning Support

____ Child/Youth Care Worker

PLEASE SEE OTHER SIDE



Has your child been connected to any of the following **professionals**?

- Daycare or Preschool Yes No
- Occupational Therapist? Yes No
- Physical Therapist? Yes No
- Sunny Hill Health Centre? Yes No
- Speech and Language Pathologist Yes No
- Child and Youth Mental Health? Yes No
- Children's Hospital? Yes No
- Child Development Center? Yes No
- Other? _____

Do you have **reports** from any of the above professionals that you will be sharing with the school? Yes No

What **language/s** are spoken in your home? _____

Is there any other information that would be beneficial for our school team to know about your child?

AP 324-1 –Photograph/Video and Media Consent Form

In accordance with the BC *Freedom of Information and Protection of Privacy Act*, the Abbotsford School District is seeking your consent to collect, retain, use and disclose photographs, videos, images, audio, and/or names of students in a variety of publications and on the School District's website(s) for education related purposes, such as recognizing and encouraging student achievement, and for the purposes of building the school community and informing others about the school district, its programs and activities.

For example, student names and/or images may be used in:

- School and School District communications, such as newsletters, brochures and reports;
- School yearbooks
- School and School District websites and social media networks;
- District media communications and advertisements such as newspaper or television or online, including photographs, video including background video or interviews;
- External media communications such as newspaper or television or online, including photographs, video and/or interviews (restricted to events where media is invited to school-related events);**
- Videos, CDs and DVDs designed primarily for educational use.

** Please note that school and district staff cannot control news media access and photos/videos taken by the media or by others in public locations (e.g. field trips or off school grounds) or school events open to the public, such as sports events, student performances, school board meetings, etc. These are considered public events.

Please complete and return to your school:

I DO GIVE MY CONSENT for the School District to collect, use and publicly disclose my child's name, voice and/or image for purposes consistent with the above. I understand that images posted on the internet may be stored and accessed outside of Canada.

I DO NOT GIVE MY CONSENT for the School District to collect, use and publicly disclose my child's name, voice and/or image for purposes consistent with the above.

Select only one of the following:

This consent will be considered valid from the date on which it is signed until completion of grade 5
 This consent will be considered valid from the date on which it is signed until completion of grade 8
 This consent will be considered valid from the date on which it is signed until completion of grade 12

Student's Name: LAST _____ FIRST _____
(please print)

Student signature (for Secondary school students only) _____

Parent/Guardian Name: LAST _____ FIRST _____
(please print)

Parent/Guardian Signature _____

Parent/Guardian Phone #s _____ Date _____

School _____

Freedom of Information and Protection of Privacy Contact:
privacy@abbschools.ca

Clear All Entries **AP 336-2 Request for Email Address Consent (CASL)**

Canada's Anti-Spam Legislation ('CASL') came into effect on July 1, 2014. As a result, Abbotsford School District would like to ensure that we have your consent to receive electronic newsletters, school and community updates on matters from your children's school(s) and the school district. There may also be announcements, event invitations, and other electronic messages which may contain advertising or promotions regarding school fundraisers, field trips, the sale of yearbooks, student pictures, uniforms, books, canteen/cafeteria sales, prom or dance tickets, or similar events and offers.

Yes, I CONSENT to receiving the above communications to my email address which I have provided below, and understand that I can withdraw this consent at any time.

* Email Address: _____

No, I DO NOT CONSENT to receiving the above communications to my email address.

Name: _____

Signature: _____

Date: _____

Your Child(ren)'s name(s): _____

This information will be kept on file at the school your child is attending in Abbotsford School District.

If you have any questions please contact us at:

info@abbyschools.ca

Abbotsford School District,
2790 Tims St,
Abbotsford, BC, V2T 4M7
www.abbyschools.ca



Dear Parents / Guardians of Ross Elementary Students:

Re: Walking Field Trips

Over the course of the year there will be opportunity for classes to visit various locations off of the school property but within walking distance of our school. For example, we may be practicing evacuation drills requiring us to walk to our secondary evacuation location off school property. Additionally, with outdoor education being a curriculum priority, we may be walking to various locations where nature can be found in the neighbourhood. In order for your child to participate in these walking trips off the school grounds, your permission is required below.

PARENTS/LEGAL GUARDIANS ARE REMINDED TO MAKE ANY SPECIAL ARRANGEMENTS WHICH MAY BE REQUIRED WITH RESPECT TO MEDICAL OR OTHER INSURANCE COVERAGE.

Accidents can be the result of the nature of the activity and can occur with or without the fault of the student, the school board or its agents, or the facility where the activity is taking place. By allowing your child to participate in these activities, you are accepting the risk of an accident occurring and you agree that these activities, as described above, are suitable for your child.

Permission Slip for Walking Field Trips

I give permission for my child, _____, to attend the walking field trips to various locations off school property throughout the year.

I confirm that my child is covered by BC Medical Plan

The telephone number where I can be reached is _____

Please print name

Parent Signature

AP 112-1 Release of Confidential Information (Red Folder)

As parent(s)/guardians(s) of:

Student Name: _____

Date of Birth: _____
year _____ month _____ day _____

I (We) hereby authorize:

School Name: _____, Abbotsford School District #34

Address: _____

to release the following confidential records concerning my above named child:

<input type="checkbox"/> Custody/Restraining Orders	<input type="checkbox"/> Behaviour Assessments
<input type="checkbox"/> Legal Matters	<input type="checkbox"/> ESL/LAC Reports
<input type="checkbox"/> Medical/Health Reports	<input type="checkbox"/> Psychologist Reports
<input type="checkbox"/> Parent Release Forms	<input type="checkbox"/> School Based Team Reports
<input type="checkbox"/> Student Services Referrals/Reports	

to the following person(s) or agency.

Signature: _____

Date: _____

Signature: _____

Date: _____



January 2026

Dear Parents and Guardians:

We are excited about welcoming your child to school in September 2026! At each of our thirty-one elementary schools, we are proud of the outstanding programming and early learning opportunities that are offered to our youngest students.

For more information about the exciting experiences offered in Kindergarten, please visit the Ministry of Education website at:

<https://www2.gov.bc.ca/gov/content/education-training/k-12/support/full-day-kindergarten>

To register for Kindergarten, your child must be five years old by December 31, 2026. You will need to provide both proof of age and proof of BC residency when you register. Parents can choose to delay entry to school for their child for one year, but we would ask that you consult with your local school principal before making this decision. Please **follow the registration process** and **carefully complete each portion**. The information you provide will be used for your child's safety in the case of an emergency.

As you help your child prepare to enter Kindergarten, we invite you to join us at one of our Strong Start sites, or at various programs outlined at abbyearlyyears.com. Please also follow us on Facebook - AbbotsfordSD.

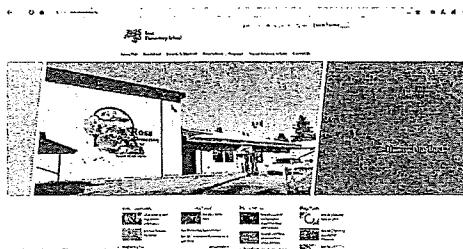
We look forward to meeting you and getting to know you more next fall. We are committed to providing learners of all ages and abilities with a multitude of innovative and individualized programs that will enable each of them to excel. If you have any questions regarding your child's entry to Kindergarten, we welcome you to contact your catchment school principal.

Sincerely,

A handwritten signature in black ink, appearing to read 'N. Ngieng'.

Dr. Nathan Ngieng
Superintendent of Schools

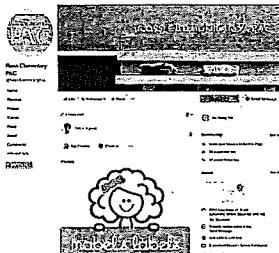
Ways to Keep Connected with Our School!



Ross Elementary Website

Bookmark our school website

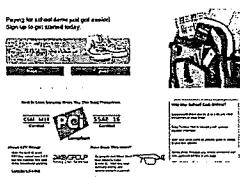
<http://ross.abbyschools.ca> for important information such as calendar events and important announcements. All information is communicated through our website.



Ross Elementary PAC Facebook Page

Another great tool to keep connected to our PAC with frequent updates and reminders and events that our PAC puts on throughout the year.

School Cash Online

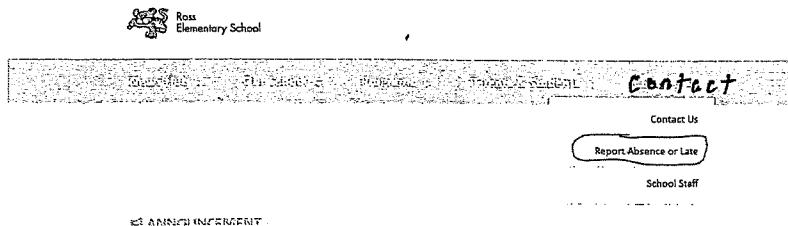


For safety and efficiency reasons, Abbotsford School District would like to reduce the amount of cash & cheques coming into our school. Please join the thousands of parents who have already registered and are enjoying the convenience of paying ONLINE! It takes less than 5 minutes to register. Instructions are attached to this package.

The website address is <https://www.schoolcashonline.com/>. If you have any question or have trouble registering, please call the school at 604-856-6079.

Reporting An Absence or Late

It is important that you let the school know when your child will be late or absent. This way we know that your child is safe at home. To report them absent, please use the Safe Arrival App. Here is the link for Safe Arrival. <https://ross.abbyschools.ca/safe-arrival> Or you can go to the Ross website. See picture below.



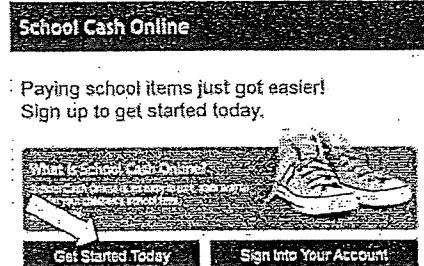
SchoolCashOnline

For safety and efficiency reasons, Abbotsford School District would like to reduce the amount of cash & cheques coming into our school. Please join the thousands of parents who have already registered and are enjoying the convenience of paying ONLINE! It takes less than 5 minutes to register. Please follow these step-by-step instructions, so you will begin to receive email notifications regarding upcoming events involving your child(ren).

NOTE: If you require assistance, select the *GET HELP* option in the top right hand corner of the screen.

Step 1: Register

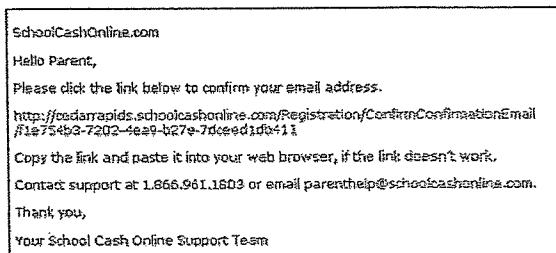
- a) If you have not registered, please go to the School Cash Online home page <https://abbotsford.schoolcashonline.com> and select the *"Get Started Today"* option.
- b) Complete each of the three Registration Steps
*For Security Reasons your password, requires *8 characters, one uppercase letter, one lowercase letter and a number*.



Step 2: Confirmation Email

A registration confirmation email will be forwarded to you. Click on the link provided inside the email to confirm your email and School Cash Online account.

The confirmation link will open the School Cash Online site prompting you to sign into your account. Use your email address and password just created with your account.



Step 3: Find Student

Note: Student Number is Not Required

This step will connect your children to your account.

- a) Enter the School Board Name
- b) Enter the School Name
- c) Enter Your Child's Name & Birth Date
- d) Select *Continue*
- e) On the next page confirm that you are related to the child, check in the Agree box and select *Continue*
- f) Your child has been added to your account

Find Student

School Information

School Board Name: School Board 1575
Looking for a student in a different school board?

School Name:

Student Information

Do you have the student number?

Student Number:

First Name:

Last Name:

Birth Date:
Date format: mm/dd/yyyy

(No students? [Click here](#))

Step 4: View Items or Add Another Student

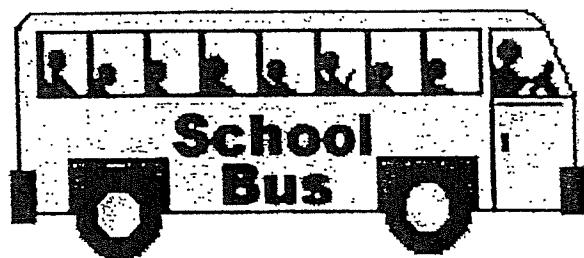
If you have more children, select *"Add Another Student"* option and repeat the steps above. 5 children can be added to one parent account.

If you do not wish to add additional children, select *"View Items For Students"* option. A listing of available items for purchase will be displayed.

BUSSING

To apply for or if you have any bussing questions, please go to the website listed below.

<https://www.abbyschools.ca/student-transportation>



Parent & Caregiver Tips

Use these suggestions to get the most out of your experience in a StrongStart BC program:

- Introduce yourself to the StrongStart BC facilitator and help your child introduce themselves.
- Sign in every day.
- Allow your child to observe an activity or group experience before participating.
- Help your child learn by experience.
- Teach them to help themselves, interact with others independently and create using their own ideas.
- Only offer assistance or instruction, when necessary, like when your child uses something for the first time or needs help resolving a conflict.
- Offer to write down your child's words to describe the pictures they create.
- Ask your child open ended questions about their experiences.
- Acknowledge your child's effort and offer encouragement frequently – especially after a disappointment.
- Relax, learn, and have fun with your child and other families.

StrongStart Centres are created through an agreement between school districts and the Ministry of Education. For more information on StrongStart or early learning visit the website at

<https://curriculum.abbyschools.ca/>



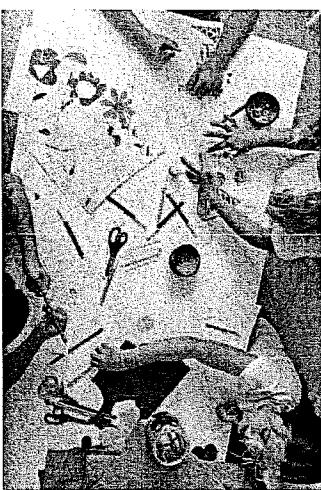
We gratefully acknowledge the financial contribution of the Province of British Columbia through the Ministry of Education.



Early Learning Programs

***Nature Thursday**

(check individual school websites for meet up location)



All drop-in, early-learning programs are free for

**pre-schooled children
accompanied by a parent or
caregiver.**



Abbotsford School District's Early Learning

Department – 778-880-8554 or
earlylearning@abbyschools.ca

<https://earlyyears.abbyschools.ca/>



Locations and Hours of Operation

STRONG START

Alexander Elementary

2250 Lobban Road

Monday – Friday 8:30am - 11:30am

Auguston Elementary

36367 Stephen Leacock Dr.

Monday – Friday 8:45am - 11:45am

Blue Jay Elementary

30995 Southern Drive

Monday – Friday 8:30am - 11:30am

Clearbrook Elementary

3614 Clearbrook Road

Monday – Friday 8:30am - 11:30am

Dr. T.A. Swift Elementary

34800 Mierau Avenue

Monday – Friday 8:30am - 11:30am

Godson Elementary

33130 Bevan Avenue

Monday – Friday 8:30am - 11:30am

Harry Sayers Elementary

31321 Blueridge Drive

Monday – Friday 8:30am - 11:30am

Jackson Elementary

33165 King Road

Monday – Friday 9:00 am – 12:00am

John MacLure Elementary 2990
Oriole Crescent Monday – Friday
8:30am - 11:30am

Margaret Stenerson Elementary
3060 Old Clayburn Road
Monday – Friday 8:45am - 11:45am

Sweeney Neighbourhood Centre
33355 Bevan Way
Monday – Friday 9:00am - 12:00pm

Ten-Broeck Elementary
2580 Stanley Street
Monday – Friday 8:30am - 11:30am

Terry Fox Elementary

3071 Babich Road

Monday – Friday 9:00am - 12:00pm

Prince Charles Elementary

35410 McKee Rd.

Family Drop-in Programs

Emémel Spá:th – Little Bears
Thursday – 9:00 am – 11:00 am
Tues & Thurs - 12:15pm - 2:15pm

PJ's & Storytime
Tues & Thurs - 5:30 - 7:30pm

Saturday Family Fun
Saturday - 9:00am - 12:00pm



*StrongStart Capacity – 24 participants per site (please try to limit 1 adult per family)



Check for information on which programs are running on Pro D days and school holidays.

* **ALL drop-in, early-learning programs are free for birth to 5 Years old children accompanied by a parent or caregiver.**

<https://curriculum.abbyschools.ca/earlylearning/strongstart>
Early Years Website
<https://earlyyears.abbyschools.ca/>



Welcome to Kindergarten!

■ Public Health Information

You can consult a nurse at your local Public Health Unit 8:30 a.m. to 4:00 p.m. Mon.-Fri. Public Health nurses provide:

- Educational health and safety resources
- Immunizations, communicable disease control

■ Child With a Serious Medical Condition?

If your child could require emergency health care or medication at school, alert the school and complete a health plan with your school principal and your child's teacher every year. You can consult a Public Health nurse if needed.

■ Stay Healthy: Wash Your Hands!

Teach children to wash hands with soap and water for 20 seconds (singing 'Happy Birthday' twice) to stop spreading germs. Wash before eating, after using the bathroom, touching pets and playing outside. Visit Dobugsneeddrugs.org.

■ Immunization

Ensure your child's immunizations are up to date before kindergarten. Two free vaccines are recommended, at age 4 and up:

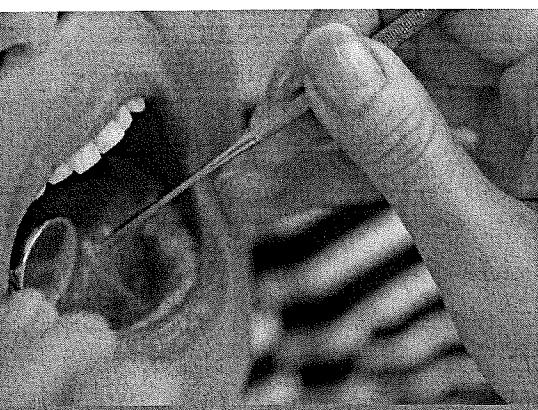
- Tdap-IPV: protects against diphtheria, tetanus, whooping cough (pertussis) and polio
- MMRV: protects against measles, mumps, rubella and chicken pox (varicella)

Book your child's immunization by calling your doctor, pharmacist (for children 5+) or Public Health Unit.

Report immunizations to your health unit. Call your unit or email reportimmunizations@fraserhealth.ca. Learn more at Fraserhealth.ca/immunizations.

■ BC Healthy Kids Program

The BC Healthy Kids Program helps low-income families with costs of basic dental care, prescription eyewear and hearing assistance for children. Children under 19 who receive Medical Services Plan (MSP) premium assistance are eligible. Call the Ministry of Social Development and Poverty Reduction at 1-866-866-0800.



■ Dental, Vision and Hearing

Kindergarten students receive dental, vision and hearing screening during school. These screenings don't replace exams by a health professional. Questions? Contact Public Health. Did you know:

- MSP provides coverage for annual eye exams for children up to age 18.
- Some children may qualify for free basic dental, eyeglass and hearing coverage from the BC Healthy Kids Program.
- UBC Dentistry offers free dental treatment for children up to 12 with financial barriers.

■ Head Lice

Head lice – brown wingless insects on the scalp – are common in school children. They are not associated with poor hygiene. They spread directly by head-to-head contact or indirectly through sharing of brushes or hats. Check your child's head regularly. If you find live lice, contact your school. They will send a notice home to remind other parents to check. For treatment advice, contact Public Health or visit Healthlinkbc.ca.

■ Healthlink BC

Health questions? Call 8-1-1 anytime 24/7 or visit Healthlinkbc.ca for free access to non-emergency health information and advice from a nurse, dietitian, pharmacist or exercise professional.

■ Healthy Eating for Healthy Living

Children who eat breakfast do better in school. Offer your child a healthy breakfast, lunch and snacks. Use an ice pack to keep cold foods cold and a heated thermos to keep hot foods hot. Children don't need juice, so pack a water bottle in their lunch. Trust your child to eat as much as they want and to stop when full. For kid-approved meal ideas, visit Fraserhealth.ca/childandyouth.



■ School Health Web Resource

Give your children and students the healthiest start at school! Visit Fraserhealth.ca/schoolhealth for clear health information aimed at students 5 to 18 years old, plus tips for parents and school staff.



■ Book a Public Health Immunization

Residents of Fraser East (Mission, Abbotsford, Chilliwack, Agassiz, Hope), call 604-702-4906. Other Fraser Health areas, call 604-476-7087. For other health issues, call numbers below.

■ Public Health Units in Your Community

Abbotsford (604) 864-3400	Agassiz (604) 793-7160	Burnaby (604) 918-7605	Chilliwack (604) 702-4900	Cloverdale, Surrey (604) 575-5100	Guildford, Surrey (604) 587-4750
Hope (604) 860-7630	Langley (604) 539-2900	Maple Ridge (604) 476-7000	Mission (604) 814-5500	New Westminster (604) 777-6740	Tri-Cities (604) 949-7200
Newton, Surrey (604) 592-2000	North Delta (604) 507-5400	North Surrey (604) 587-7900	South Delta (604) 952-3550	White Rock (604) 542-4000	 fraserhealth