

BACI CHILDREN'S SERVICES
CHILD CARE APPLICATION
(UNDER 3 & 3 -5 YEARS)

- ☐ Fair Haven Children's Centre - 4375 Rumble St., Burnaby, BC V5J 3V6 Phone: 604-437-0171
- ☐ Little Eagles Children's Centre - 3755 Banff Ave., Burnaby, BC V5G 3Z9 Phone: 604-544-1355
- ☐ Variety Cariboo Children's Centre - 7200 Cariboo Rd., Burnaby, BC V3N 4A7 Phone: 604-544-1355

Name of Child: _____

Address: _____ Postal Code: _____

Home Phone: _____ Date of Birth: _____ Sex: _____
Month/Day/Year

Parent or Guardian Name: _____ Home phone: _____

Email: _____ Cell Phone: _____ Work phone: _____

Parent or Guardian Name: _____ Home phone: _____

Email: _____ Cell Phone: _____ Work phone: _____

Childcare Service will be needed: ____/____/____
Month/Day/Year

Please indicate preference:

Full-time (priority given: _____ or *Part-time: M__ T__ W__ Th__ F__

Infant and Toddler Program (10months to 3 years) or Three to Five Program (3 - 5 years)

Does your child require a special needs placement? _____

If so, is your family in contact with the Supported Child Development Program? _____

Any additional comments: _____

Signature of Parent or Guardian: _____ Date of Application: ____/____/____
Month/Day/Year

FOR OFFICE USE ONLY:

Date of Receipt at the Center: _____ Signature of Supervisor: _____
Month/Day/Year

*Due to extensive waitlist, not all requests can be accommodated. **Families will be contacted if a space opens.**