COUNTY OF LAMBTON

CHILDREN'S SERVICES DEPARTMENT

Child Care Subsidy
150 N. Christina Street
Sarnia, ON N7T 8H3
Telephone: 519 344-2057
Toll-free: 1-800-387-2882
Fax: 519 344-2023
www.lambtononline.on.ca

EARLY LEARNING PROGRAM - "ELP" REGISTRATION FORM

Please Print Clearly

SECTION 1: APPLICANT'S INFORMATION

1. Applicant's Last Name	**Applicant's First Name**	**Relationship to Child** ☒ ☐ Parent ☐ Legal Guardian	
2. Applicant's Last Name	**Applicant's First Name**	**Relationship to Child** ☒ ☐ Parent ☐ Legal Guardian	
Child's Last Name	**Child's First Name**	☐ Male ☐ Female	**Child's Date of Birth** (dd/mm/yyyy)

SECTION 2: APPLICANT'S ADDRESS

Street #	**Street Name**	**Apt # or P.O. Box #**	**Telephone #**
City/Town		**Postal Code**	**Municipality/Township**

SECTION 3: CHILD'S ELP SCHEDULE - (to be completed by Child Care Agency)

Agency Name &Site	**Agency Contact**	**Agency Phone Number**

Child Schedule - Please ☒ Approved Days	**Monday**	**Tuesday**	**Wednesday**	**Thursday**	**Friday**	**Agency Initials**
	☐am ☐ pm	☐am ☐ pm	☐am ☐ pm	☐am ☐ pm	☐am ☐ pm	

****If the child's schedule is not consistent each week please provide detailed schedule on separate sheet****

SECTION 4: CHILD'S BIRTH VERIFICATION

Please ☒ (check) one and attach a photocopy of your child's birth verification:

- ☐Birth Certificate
- ☐Canadian Citizenship Card
- ☐Confirmation (Registrar General) of Notice of Birth Registration
- ☐Immigration Landing Record
- ☐Indian Band Record
- ☐Naturalization Certificate
- ☐Passport, Canadian or Foreign
- ☐Health Card
- ☐Religious Records (i.e. Baptismal Certificate)
- ☐Statement of Live Birth
- ☐Temporary Health Card

SECTION 5: ADDRESS VERIFICATION

Please ☒ (check one) and attach a photocopy of one of the following documents showing your **current** address:

- ☐Driver's License
- ☐Photo Health Card
- ☐NCBC or CTC Assessment
- ☐Custody Papers or CAS document stating Legal Guardianship
- ☐Income Tax
- ☐Rent or Mortgage
- ☐Hydro or Utility Bill
- ☐Pay Stub

APPLICANT'S SIGNATURE	**DATE**
APPLICANT'S SIGNATURE	**DATE**

Personal information on this form will be used to assess eligibility for the Early Learning Program. Questions about this collection may be directed to the Manager, Children's Services Department, 160 Exmouth Street, Point Edward, Ontario N7T 7Z6. 519 383-8331 or toll-free 1-800-667-1839

OVER…

To Register for the Early Learning Program (ELP)

APPLICANTS MUST:

1. Complete the Early Learning Program Registration Form (one form per child).
2. Attach a photocopy of your child's age verification and a photocopy of your current address verification.
3. Section 3 completed and initialed by the Child Care Agency your child is attending.
4. Send the completed registration form and copies of the verification documents to:
   Children's Services Department
   150 N. Christina Street
   Sarnia, Ontario N7T 8H3
   Attention : Child Care Subsidy
   Fax: 519 344-2023
5. Once eligibility is verified, you and the child care agency will receive an "Approval Letter"
6. Fees will not be paid until the Children's Services Department verifies your eligibility.
7. **QUESTIONS? Contact the Children's Services Department at 519 383-8331 ext.3591 or toll free 1-800-667-1839**

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