

TOPP KIDS Out Of School Clubs /Foundation

425 78th Avenue SW

Calgary Alberta T2V 5K5

(E) registrations@toppkids.com

(W) www.toppkids.com

CHANGE OF INFORMATION FORM

If a family chooses to make changes to their information at TOPP KIDS, a *Change Of Information Form* must be submitted within the first 5 (five) calendar days of the month in order to have changes made by the last calendar day of that month. Any *Change Of Information Form* submitted later than the 5 (five) day period will not be able to change their information for that month. Any form submitted after the 5th will be considered for the end of the following month. *** ENROLLMENT CHANGES FOR CURRENT SCHOOL YEAR WILL NOT BE ACCEPTED FOLLOWING APRIL 5th, 2023***

Section 1 and 6 must be completed in all circumstances.

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Section 1: Member Information * Must be completed.	
Last name of child on file:	
First name of child on file:	
School Attending:	
Section 2: Changing Personal Information	
☐ Child ☐ Parent ☐ Emergency Co	ontact
New Last name on file: New First name file:	
Address:	
Phone Number: Email:	
Section 3: Changing Registration Information	
* Spaces are based on availability of individual programs and subject to approval	
Registration Type	
☐ Kindi Club ☐ Before & Afterschool Pr	• Withdrawai nom a program,
Currently: ☐ Full Time ☐ Part Time ☐ Drop In	please complete the Withdrawal Form found here:
、Changing to: □ Full Time □ Part Time □ Drop In □ Waitlis	ted https://www.toppkids.com/



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Section 4: Chan	ging Subsidy Information	
Subsidy Status:	☐ I Have Subsidy in Place	☐ Waiting For Subsidy
	☐ Subsidy Info Has changed	□ Not Subsidised
Family ID:		Child ID:
Minimum number of	hours:	Subsidy Amount Confirmed \$
Start Date:		End Date:
	Please attach any Subsidy Approvals fron	n the Government of Alberta / Canada
Section 5: Chan	ging Fee Payment Informa	tion
	☐ Kindi Club ☐ Before	& Afterschool Program
Currently: □ 1 st o	f the month \Box 15 th of the mor	nth 🗆 Split
Changing to: □ 1 st o	If the month \Box 15 th of the month	nth 🗆 Split
Start Date (month) _		
	Please attach an updated PAD Form or po	ost-dated cheques (link found below).
	https://www.toppkids.c	om/families/forms/
Section 6: Signe	ed Confirmation * Must be comp	pleted.
•	this box and typing or printing my formation Form and related is true	name, I confirm that all the information in this
Members Name:	Members Name: Date:	
ALL COMPLETE	FORMS MUST BE EMAILEI	TO REGISTRATIONS@TOPPKIDS.COM
Accounts Office	Only	
Received Date:	eceived Date: Date Change takes effect:	