

San Tan Montessori

Returning Student Registration Packet Instructions

Student Name _____

Registration for 2012-2013 school year.

Thank you for your continuing interest in San Tan Montessori. As we begin to prepare for next school year, this form will guide you through the important steps and dates to ensure that your child will be able to successfully register and attend San Tan Montessori.

First and foremost are the dates. If we do not receive this packet back with all the items identified, your child will not have a guaranteed spot for the upcoming school year.

The entire packet and all information must be returned to the front office by 4:00PM

February 3, 2012 in order to guarantee your child's spot for next year. Any packet received after this date will be placed into open enrollment.

Please be sure that the following items are filled out completely and returned to the front office along with the \$250.00 Registration fee.

- Student Application Form (two copies as included in enrollment packet)
- Enrollment Agreement
- Student/Parent Handbook Compact
- Emergency Card _____ Health Alert
- Nap Request
- Varicella (Chickenpox) Form
- Immunization Record
- Credit Card Authorization Form
- \$250.00 Registration Fee: _____Cash _____Check# _____Credit Card
- Extended Care Contract (optional)



SAN TAN MONTESSORI
STUDENT APPLICATION

San Tan Montessori does not discriminate regarding color, race, religion, national and ethnic origin, special needs, or language proficiency of students regarding policies, admission and school-administered programs.

Student First Name: _____ Last Name _____ Name Used _____

Address: (Street) _____ (City) _____ (Zip) _____

Home Phone: (____) _____ Birthdate: ____/____/____ Male Female

Ethnicity: Asian African American Hispanic Indian Caucasian Other: _____

Mother's Name: _____ Cell Phone: _____

Mother's Email Address: _____

Father's Name: _____ Cell Phone: _____

Father's Email Address: _____

Student lives with (check all that apply):

Both Parents Mother Father Stepmother Stepfather Other: _____ (Relationship)

Please provide contact information if other than the student's Mother and Father:

Name: _____ Cell Phone: _____

Parents are: Married Divorced Separated Mother Deceased Father Deceased

Are you living in temporary housing? (circle) Yes No If so, is this due to hardship? (circle) Yes No

I, the parent of _____, agree to:

- Provide a lunch daily for my child.
- Provide transportation to and from school every day.
- Provide prompt and timely drop-off and pick-up of my child daily
- Provide student pick-up within 30 minutes of illness or severe behavior notification
- Give my permission to have photographs of my child published in articles and media viewed by the general public.

Mother's Signature

Father's Signature

Date

For Office Use Only: FRONT OFFICE COPY

Date App. Rec'd: _____ Yr. Entering: _____ Teacher: _____

Start Date: _____



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Address: (Street) _____ (City) _____ (Zip) _____

Home Phone: (____) _____ Birthdate: ____/____/____ Male Female

Ethnicity: Asian African American Hispanic Indian Caucasian Other: _____

Mother's Name: _____ Cell Phone: _____

Mother's Email Address: _____

Father's Name: _____ Cell Phone: _____

Father's Email Address: _____

Student lives with (check all that apply):

Both Parents Mother Father Stepmother Stepfather Other: _____ (Relationship)

Please provide contact information if other than the student's Mother and Father:

Name: _____ Cell Phone: _____

Parents are: Married Divorced Separated Mother Deceased Father Deceased

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Mother's Signature

Father's Signature

Date

For Office Use Only: ACCOUNTING COPY

Date App. Rec'd: _____ Yr. Entering: _____ Teacher: _____

Start Date: _____

**SAN TAN MONTESSORI
ENROLLMENT AGREEMENT
2012 – 2013**

Child's Name: _____ Age: _____

Registration Fee: A \$250 non-transferable, non-refundable registration fee is due at the time of registration. Withdrawal at any time, for any reason, after the submission of the enrollment forms results in the forfeit of the registration fee. This fee cannot be applied to the payment of any other fees.

Tuition: Please circle the desired program below

Priority: Enrollment priority is given to full time students

<u>Program</u>	<u>5 days a week</u>	<u>3 days a week</u>
AM Primary: 8:30 – 11:45	\$575 (\$5465)	\$400 (\$3800)
PM Primary: 12:15 – 3:30	\$575 (\$5465)	\$400 (\$3800)
Full Day Primary: 8:30 – 3:30	\$725 (\$6885)	\$525 (\$5035)

Tuition Policy: San Tan Montessori has a 10-month academic year for all classes. Tuitions are based on the full year's fee which has been divided into 10 equal monthly payments for your convenience. Full, 10-month payments are accepted and shown in parenthesis with a discount applied. Payments are not considered "monthly" charges, they are the full year's tuition divided into a 10 month period. Payments are billed on the 1st of each month for the following month, beginning July 1st and ending April 10th. Tuition is due by the 10th of each month. A \$25 late fee is billed for tuition payments arriving on the 11th through the 22nd *Tuition is not refunded or pro-rated due to absences caused by illness, vacations, withdrawal/dismissal, or otherwise.*

Multiple Students: Total tuition will be reduced at a rate of 5% if multiple students from the same family are enrolled in our preschool program.

Extended Care: I am interested in the following extended care services for the school year:

- | | | | |
|-----------------------|-------------|----------------|----------------------------|
| <input type="radio"/> | Before Care | 7:30 – 8:20 AM | \$125/month or, \$15/day* |
| <input type="radio"/> | After Care | 3:30 – 5:00 PM | \$175/month or, \$20/day* |
| <input type="radio"/> | Full Day | 7:30 – 5:00 PM | \$250/month or, \$35/day** |

*You will be charged the daily rate on the first 4 uses of any extended care program (before, after and full) in a month. On the 5th usage of any extended care program you will be charged the full monthly rate listed above.

**Please note; when a preschool student is enrolled in a 5 day/full day program, as well as before and after school care the cost of extended care will be reduced by 50% (from \$250 per month to \$125 per month).

Extended care is billed the first of the month following month of use and is due by the 10th.

Late Pick-Up Fee: San Tan Montessori is open from 7:30am – 5:00pm. Beginning at 5:01pm, **\$1.00** per minute for each additional minute is billed until your child is picked up.

Returned Checks: A **\$25.00** fee will be charged on each returned check.

Failure to Pay: The Parent agrees to pay the aforementioned tuition and fees as specified, time being of the essence with respect thereto. In the event of non-payment of any funds due hereunder, San Tan Montessori, reserves the right to cancel this agreement and to exclude the child from participation in the instruction. The unpaid balance shall accrue thirty days from and after the due date, until paid in full, at the interest rate of 24% per year. In the event that it becomes necessary for San Tan Montessori to employ a collection agency and/or attorney for collection of any amounts due under this agreement, parent agrees to pay all the costs and expenses incurred by San Tan Montessori, whether or not litigation is initiated, including, but not limited to all postage fees, attorney fees, and court costs incurred by San Tan Montessori. Delinquent accounts will be sent to a company or lawyer employed by the school for collections management. If payment is still delinquent at the end of the second month the student's attendance will be suspended on the 1st day of the next month. Placement is lost if balance is not brought to a current status by the 30th of that month.

Withdrawal: This agreement may be terminated by parent **upon 60 day written notice to the school by the parent.** Parents will be responsible for payment of tuitions and fees for sixty days following the office receiving the written notice of withdrawal. Parent agrees that withdrawal or dismissal of their child(ren) after the execution of this agreement, whether as a result of accident, transfer, relocation due to parent's occupation, financial difficulty, sickness, disciplinary action, disagreement with teaching style, school policies, or otherwise, does not relieve the parent of the responsibility of fulfilling the school's tuition policy.

Dismissal by San Tan Montessori School: The school reserves the right to discharge, at any time, any child, who, in the opinion of the Administration and their teacher is not benefiting from the instruction or whose behavior is detrimental to the program at the school. The recommendation and observations of the student's teacher are taken into consideration and withdrawal is not undertaken unless the school can see that it is in the best interest of the student, and/or the classroom.

Disclosure: Parent has disclosed any pertinent information in writing to San Tan Montessori. Pertinent information includes any physical, mental, or emotional disabilities of the child or any other matter which may affect the child's enrollment and/or participation in school. Parent signifies by signing this agreement that the child is physically capable of participating in all aspects of the Montessori program chosen.

Upon signing, I have read the Enrollment Agreement and agree to abide by the policies, both financial and otherwise.

Signature of Parent (Father) or Guardian

Date

Signature of Parent (Mother) or Guardian

Date

San Tan Montessori School Family Handbook Agreement

School-Parent-Child Compact

Responsibilities of the School

- To provide an environment that is safe, clean, and attractive.
- To maintain the standard and licensing requirements by State, County and City Agencies.
- To provide an authentic Montessori program that is stimulating, developmentally appropriate, and the best possible.
- To provide trained teachers who are exceptional in their capacities for observing, guiding and caring, and who are pursuing excellence in their professions.
- To remain committed to professional growth and openness to new ideas.
- To report to Child Protective Services suspected cases of child abuse and neglect.

Responsibilities of the Parents

- To bring and pick up child(ren) on time. To **ALWAYS** sign your child(ren) in and out with first and last name.
- To fulfill financial and legal obligations to the school promptly.
- To support both child and school by attending parent meetings and conferences, by keeping informed on policies of school and goals for your child, by volunteering time, resources, effort, and talent where possible.
- Parent must treat the staff and their children with respect both verbally and physically.
- Clothes should be modest and conservative. This includes refraining from exposing tattoos or unusual piercing.
- Use a soft voice while inside the classroom.
- Refrain from using inappropriate language.
- If you have a conflict with a staff member, parent, or student, please take it to the Administrator immediately. Unsubstantiated gossip undermines the professionalism of the school.
- Parents must be sober and not under the influence of drugs or alcohol when on campus and picking up children. Smoking is not allowed on campus.
- Firearms and other weapons are not allowed on campus.

Responsibilities of the Child

- To construct the adult he/she will become.
- To respond to direction and correction.

Parent Printed Name	Date	Parent Signature	Date
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By signing you are agreeing to abide by the policies of San Tan Montessori School.

So that we may prepare the nap room accordingly, please check one of the boxes below. Should your preference change in the future, please fill out a blue note and submit it to the front office ASAP. Thank you for your cooperation.

- I would like my child to nap daily.
- I would like my child to nap as needed (will give written notice).
- I would not like my child to nap.

Student's Name: _____ Teacher: _____

Parent's Signature: _____ Date: _____

Documentation of Varicella (Chickenpox) Disease or Immunization

Student Name _____ Date of Birth _____

School Name _____ Grade _____

Has your child ever had chickenpox? (please circle one answer) **Yes** **No** **Don't Recall**
(go to #1) (go to #2) (go to #1)

1. Please answer the following questions (please circle one answer):

- | | | | |
|---|------------|----------------------------------|---------------------|
| a. Was your child in "face to face" contact with other children who had chickenpox? | Yes | No | Don't Recall |
| b. Did your child have a rash on his/her body? | Yes | No | Don't Recall |
| c. Did the rash "itch"? | Yes | No | Don't Recall |
| d. Were there blisters present? | Yes | No | Don't Recall |
| e. Did "scabs" appear toward the end of the rash? | Yes | No | Don't Recall |
| f. When did your child have chickenpox?
(approximate date) | | _____/_____
Month Year | |

- 2. If your child has not had chickenpox, has he/she had the chickenpox (varicella) shot?** **Yes** **No** **Don't Recall**
(please circle one answer)

If you circled **YES**, please take your child's immunization record to the school nurse so the date of the shot can be recorded in your child's health record.

If you circled **No or Don't Recall**, please take your child to their doctor or to the local health clinic to get the chickenpox shot, then take their immunization record to the school nurse so the date can be recorded in your child's health record.

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____

Address: _____

Telephone Number (where you can be reached during the day): _____