

Blessed Beginnings Preschool

Enrollment Form 2010-2011

Please Check One

Wed (1 day) 2year old class Wed (1 day) 3 year old class *
 Tues /Fri (2 day) 2 year old class Tues/Fri (2 day) 3 year old class* Tues/Wed/Fri (3day) 4year old class
 Tues/Wed/Fri (3 day) 3 year old class* Tues /Wed/Fri (3 day) Pre-K class

Child's Name: _____ Home phone _____

Date of Birth: _____ Age (as of 9-1-10) _____ M _____ F _____

Address: _____ City _____ State: _____ Zip: _____

Parent/Guardian: _____ Business phone: _____

Cell Phone (Pager): _____ Email: _____

Parent/Guardian: _____ Business phone: _____

Cell Phone (Pager): _____ Email: _____

Please list names and ages of siblings: _____

Please list any information, which may be helpful to the preschool (allergies, medical conditions, disabilities, fears, custody)

* I understand that children three (3) and up must be potty trained. *Sign _____

In case of an emergency, illness, or accident involving your child, the preschool is authorized to contact and/or release your child to one of the following persons if the parent/guardian cannot be reached.

Name Home Phone Business/Cell Phone

Name Home Phone Business/Cell Phone

Name Home Phone Business/Cell Phone

Parent Signature: _____ Date: _____

This form must be completed and returned to the Director with the \$40.00 enrollment fee and a copy of the child's current immunization record.

Blessed Beginnings Preschool

Tuition Agreement

Name of Child: _____

Parents/Guardians: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

I, the undersigned, agree to:

1. Present all forms as required by Blessed Beginnings Preschool for enrollment purposes.
2. Release Blessed Beginnings Preschool from responsibility for accident or injury while my child is at preschool or on the way to or from preschool.
3. The use of pictures in which my child may appear while at preschool.
4. The \$40.00 enrollment fee as a deposit, which guarantees my child a space in the preschool (if space is available) for the school year. This payment is nonrefundable should I decide to withdraw my child from Blessed Beginnings Preschool
5. Give at least two weeks notice to Blessed Beginnings Preschool should I decide to withdraw my child from the program. I understand I am responsible for that month's tuition.
6. Pay Blessed Beginnings Preschool yearly tuition. Can be paid in full or in (9) monthly installments of \$85.00 (for 1 day program), \$145.00 (for 2 day program) or \$195.00 (for 3 day program). Payment is due on the first school day of each month. I understand a \$15.00 late fee may be charged, if not paid by the tenth.
7. Arrive promptly before and after school to bring and pick up my child. Child shall not arrive prior to 9:25 a.m. and shall be picked up promptly by 2:30 p.m.
8. Pay all charges related to any and all returned checks.

I understand that fees and tuitions are not refunded or credited for absences, and there is no provision for making up missed days.

Signature: _____ Date: _____