



ENROLLMENT FORM 2010/2011

Office Use Only	
Cash or Check#	
Amount:	
Registration	
Tuition	
Start Date:	

Child's First Name \_\_\_\_\_

Child's Last Name \_\_\_\_\_

Boy \_\_\_\_\_ Girl \_\_\_\_\_ Birth Date \_\_\_\_\_

Class: \_\_\_\_\_ Toddlers (12-23 months) \_\_\_\_\_ Two's (24-35 months)

\_\_\_\_\_ PreK 3's (Age 3 by 9/1/09) \_\_\_\_\_ PreK 4's (Age 4 by 9/1/09)

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Address \_\_\_\_\_  
Street City Zip

Home Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Father's Cell \_\_\_\_\_ Mother's Cell \_\_\_\_\_

Father's Work \_\_\_\_\_ Mother's Work \_\_\_\_\_

If parents are separated or divorced, with whom does child live? \_\_\_\_\_

Number of children in family? \_\_\_\_\_ Position of this child? \_\_\_\_\_

Emergency contact if neither parent can be reached:

\_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_

Church Membership \_\_\_\_\_

Does child have prior group experience such as child care, preschool, or religious education?

Please list: \_\_\_\_\_

List any health concerns, physical difficulties, allergies or food restrictions, as well as any other info the teacher needs to know (use back of form if necessary): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How did you hear about The Ridge Preschool? \_\_\_\_\_

# ENROLLMENT INFORMATION 2010/2011

Child's Name: \_\_\_\_\_

## Medical Information

Physician's Name \_\_\_\_\_ Phone \_\_\_\_\_

I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached by The Ridge Preschool in the case of an emergency.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

I understand that under no circumstances will The Ridge Preschool administer medication of any kind to my child. In the event that medication needs to be administered, I will make arrangements to administer it myself, or will designate in writing a friend or family member who will do this.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

## Approved Pick Up List

The following persons may pick up my child from The Ridge Preschool during this school year. I understand that I must let the school know in advance that this person is picking up my child/children, and that positive ID will be required from this person. If the person picking up my child is not on the list, the child will not be released until the parent is contacted and confirms permission for the child's release.

Authorized Person	Relationship	Contact Numbers
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Acceptance Agreement**

I accept the rules, policies and regulations of The Ridge Preschool as they now exist and as they may be amended from time to time. I agree to familiarize myself with The Student Handbook, which will be issued prior to the first day of school.

I relieve and release The Ridge Church and The Ridge Preschool from any liability for injury or illness resulting from circumstances or occurrences unknown to them, or which might not be reasonable within their control.

To my knowledge all information on file at The Ridge Preschool is current and correct. I also understand that is my responsibility to update this information in a prudent and timely manner, as circumstances change.

\_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_  
Date

**Statement of Participation**

On occasion, our curriculum includes opportunities for resource people from the community (i.e. fire fighters, police, dental hygienists, veterinarians, etc.) to visit our classes to share educational information with the students.

Likewise, we will have "special days" at school (i.e. Harvest Day, Jesus' Birthday Party, Splash Fest, etc.) where we may have special activities that are not a part of the weekly schedule.

My child has permission to participate in all activities planned and organized through The Ridge Preschool.

\_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_  
Date

**Photo/Video Permission**

There will be times during the school year that photographs and/or video tapes of the children will be taken. The photos and videos will be used for class projects, school newsletters, or the TRP website.

\_\_\_\_\_ Yes, I give permission for my child to be photographed or videotaped while at The Ridge Preschool.

\_\_\_\_\_ No, I do not want my child photographed or videotaped while at The Ridge Preschool.

\_\_\_\_\_  
Parent/Guardian Signature \_\_\_\_\_  
Date

The Ridge Preschool does not discriminate on the basis of race, color, religion, national and ethnic origin in administration of its admissions, educational policies, and other school administered programs.

# ENROLLMENT CONTRACT 2010/2011

The Ridge Preschool, nonprofit partner of The Ridge Church, and \_\_\_\_\_  
Parent/Guardian Name

who is legal parent or guardian, hereby contract for enrollment of \_\_\_\_\_  
Child Name

for the 2010-2011 school year.

**Registration Fee:** \$150

<b>Class:</b>	<b>Monthly Tuition</b>
_____ Toddlers (12-23 months)	\$180
_____ Two's (24-35 months)	\$180
_____ PreK 3's (Age 3 by 9/1/09)	\$190
_____ PreK 4's (Age 4 by 9/1/09)	\$190

**Eligible Discount:**

_____ Church Member	-\$15
_____ Additional Child	-\$15
_____ Other	-\$_____

**FINAL MONTHLY TUITION:** \$\_\_\_\_\_

## Tuition Policies:

- The registration fee is due at time of enrollment to reserve placement for your child. This fee is NON-REFUNDABLE and NON-TRANSFERABLE.
- Tuition is due the 1st Tuesday of each month Sept thru May. If tuition is not received by the 10th of the month, a \$15 late fee will be charged to your account. Cash payments require a receipt from the office.
- A \$25 service fee will be charged on all returned checks.
- Members of the Ridge Church and families with multiple children enrolled are eligible for a \$15.00 discount. The additional child discount will be applied to the second child enrolled in the program, as well as to any subsequent children. A maximum monthly discount of \$15.00 per child will be allowed.
- The school reserves the right to terminate services for accounts 30 days past due. Tuition fees are due regardless of the child's attendance. Thirty day written notification is required to terminate tuition charged for any program.
- There may be other small fees for special activities in which my child participates that must be paid separately at the time of the activity.
- It is required that all parents/guardians become familiar with the Student Handbook that will be issued prior to the first day of school.

I agree to abide by the policies and procedures of The Ridge Preschool. I agree to pay all fees according to the enrollment contract agreement.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approved By