



Westminster Presbyterian Preschool

2024 *SUMMER* Registration Agreement

SECTION 1 – Registration

Please fill out the information in this section so that we can process your request properly.

Today's Date: _____

Child's Name _____

Child's Birth Date ___/___/___

Mother's Name _____

Father's Name _____

Address _____

Address _____

City _____ Zip _____

City _____ Zip _____

Mother's Cell Phone _____

Father's Cell Phone _____

Mother's Work Phone _____

Father's Work Phone _____

Mother's Email _____

Father's Email _____

Please tell us of any special conditions such as allergies, language limitations, visitation/custody issues, special habits, etc., that pertain to your child _____

Please tell us where you heard about our school (referral, internet, advertisement, etc.) _____

Requested Programs: Please mark all that apply.

Preschool Classes (July 1, 2024 through August 30, 2024)

Schedule	Morning (8:30-12:00)	Lunch Bunch (12:00-1:00)	6-hour (8:30-2:30)	8-hour (8:30-4:30)	Before School Care (7:30-8:30)	After Care (4:30-5:30)
2 days						
3 days						
4 days						
5 days						

"Kinder Camp" (July 1, 2024 through August 31, 2024) Note: Pre – kindergarten or KT (Kindergarten Transition class) is a requirement.

Schedule	Morning (8:30-12:00)	Lunch Bunch (12:00-1:00)	6-hour (8:30-2:30)	8-hour (8:30-4:30)	Before School Care (7:30-8:30)	After Care (4:30-5:30)
5 days only						

SECTION 2 – ENROLLMENT

-FOR OFFICE USE ONLY-

Preschool Classes (July 1, 2024 through August 30, 2024)

Schedule	Morning (8:30-12:00)	1Lunch Bunch (12:00-1:00)	6-hour (8:30-2:30)	8-hour (8:30-4:30)	Before School Care (7:30-8:30)	After Care (4:30-5:30)
2 days						
3 days						
4 days						
5 days						

"Kinder Camp" (July 1, 2024 through August 30, 2024) Note: Pre – kindergarten or KT (Kindergarten Transition class) is a requirement.

Schedule	Morning (8:30-12:00)	Lunch Bunch (12:00-1:00)	6-hour (8:30-2:30)	8-hour (8:30-4:30)	Before School Care (7:30-8:30)	After Care (4:30-5:30)
5 days only						

Start Date ___/___/___ Classroom _____ Teacher (s): _____/_____

Annual Material / Activity Fees \$ 150.00 Monthly Tuition \$ _____

Processing Fee for New Child \$ 100.00 Check Number # _____ Amount: \$ _____ Check Date ___/___/___

Coupon / Discount / Pro-rate \$ _____ Cash Amount \$ _____

Total Deposit Due \$ _____ Enrolled & Approved by _____, Director Date ___/___/___

SECTION 3 – REGISTRATION AGREEMENT - 2024

Thank you for becoming a part of our family. We are so happy to have you. Please carefully read the following statements and sign below.

I agree to the following:

- _____ I have received a copy of the Parent Handbook.
Initial
- _____ Tuition is due on the first of the month. A late fee of \$50 is assessed if tuition is not
Initial paid by the 5th. Returned checks are assessed a \$50 service fee.
- _____ Tuition is based on an annual 12-month cost of the program. Payments are divided
Initial into equal monthly payments. The amount due is unrelated to the number of school days per month.
- _____ **All enrollment and tuition fees are non-refundable.**
Initial
- _____ A 30-day **written** notice of withdrawal is required to prevent any future financial
Initial obligation.
- _____ A 30-day written notice is required for any changes in schedule.
Initial
- _____ I understand that the tuition prices increase once a year.
Initial
- _____ I give permission for my child to participate in school-sponsored field trips and
Initial for my child to be photographed or videotaped for school purposes.
- _____ I understand that the Licensing Agency that governs this facility under the State of
Initial California Department of Social Services - Child Care Division has the authority to interview children, inspect and audit their records without prior consent.
- _____ I give permission to be included in the Parent Directory.
Initial
- _____ I will notify the school immediately if there is a change of address, email or phone
Initial number or when my child will be absent from school.
- _____ Hours of operation are 7:30 A.M. to 5:30 P.M. Monday through Friday.
Initial
- _____ I understand that my child's arrival and pick up must be consistent with the hours
Initial indicated on this Registration/Enrollment Agreement. There will be a late fee of \$1.00 per minute assessed for late pick up.
- _____ I understand that under certain circumstances my child may be asked to leave the
Initial program.

Thank you for your commitment to Westminster Presbyterian Preschool!



Child's Name

Parent Signature

Date