



Application for Admission

Woodpark Montessori – Burnsville

Instructions: Please print and fill out **both** sides of this form completely.

Parent Information

<i>First</i>		<i>First</i>	
<i>Last</i>		<i>Last</i>	
<i>Relation to Child</i>	Mother Father Grandparent Foster Other; Specify _____	<i>Relation to Child</i>	Mother Father Grandparent Foster Other; Specify _____
<i>Email</i>		<i>Email</i>	

Address Information

<i>Address</i>		<i>Same as Primary Address</i>	
<i>City</i>		<i>City</i>	
<i>State, Zip</i>		<i>State, Zip</i>	
<i>Primary Phone</i>	(____) _____ - _____ Mobile Home Work	<i>Primary Phone</i>	(____) _____ - _____ Mobile Home Work
<i>Alternate Phone</i>	(____) _____ - _____ Mobile Home Work	<i>Alternate Phone</i>	(____) _____ - _____ Mobile Home Work

Work Information

<i>Employer</i>		<i>Employer</i>	
<i>Position</i>		<i>Position</i>	

Other Information

<i>Separate Ledgers</i>	Does your family require separate ledgers per parent? Yes No
<i>Custody Notes</i>	

Child Information

First		Last	
Birthday or Due Date	____/____/____ Check if Due Date	Sex	Male Female
Child Lives With?		Special Conditions and Notes	
Child's Ethnicity		Child's Primary Language	
Allergies		Family Culture, Customs, and Language	

Program Information

Level	Infant (6 wks-15 mo)	Toddler (16 mo-32 mo)	Preschool (33 mo-6yrs)
Program Days	Note: Infants must be on a 5 full or 5 extended schedule.		
	5 Day (M-F)	3 Day (M, W, F)	2 Day (T, Th)
Program Times (Please select one)	Extended Day 6:30am – 6:00pm	Full Day 8:00am – 4:00pm	School Day 8:00am – 3:30pm
			Half Day 8:00am – 12:30am <i>(only available for preschool)</i>

The \$200.00 Application Fee and \$100 Activity and Material Fee will be processed via the EFT Form accompanying this application. This application fee is non-refundable. There is no refund in tuition for holidays, illness, vacation, or closings due to emergency situations, inclement weather, acts of God or other time away from the program. One month's written notice is required prior to withdrawal or for reduction in schedule. Any tuition not paid by the 5th of each month will incur a \$50.00 late fee. Endeavor Schools reserves the right to request a child withdraw from the program if, in the opinion of the school, the child does not adjust to the program, benefit from the program or if the family account is not in good standing. Any coupons must be submitted with this application. I understand and agree to the above terms.

I hereby authorize Woodpark Montessori to take my child to its source of emergency care or doctor, as listed on the Center Information Board, if they are unable to contact the person(s) or any of the emergency numbers listed. It is understood that in some medical situations, the staff will need to contact the local emergency resources before the parents, child's doctor, and/or an adult acting on the parent's behalf.

Parent/Guardian Signature _____ Date: ____/____/____

Parent/Guardian Signature _____ Date: ____/____/____

App Fee:	Date Rec'd:	Parent has Packet?	Yes No	Received By:	Waitlist	Yes
Start Date:	Classroom:	Current Parent?	Yes No		CRM?	Yes No

Woodpark Montessori Policies

- Woodpark Montessori's policies are subject to change.
- I understand a 30-day notice must be given to withdraw or reduce my child(ren)'s schedule.
- I agree to allow Woodpark Montessori to communicate with me by telephone, email, Procure Engage, or any means necessary in the best interest of my child(ren).
- Woodpark Montessori may disenroll a child(ren) without prior notice if; the handbook policies are not followed, tuition payments are not made, or if it is the sole opinion of Woodpark Montessori, that it is in the best interest of the child(ren) or Woodpark Montessori.
- If I fail to pick-up my child and/or contact the school, and I or another authorized pick-up person cannot be reached within 1 hour after closing time (6:00pm), school staff may release my child to the custody of child protective services or other local authorities.
- I understand that the staff at Woodpark Montessori are mandated reports and may send in a report in the best interest of a child(ren) to the proper authorities.
- I understand that the staff at Woodpark Montessori are mandated referrers and may send me a referral to any program they believe will be helpful for the growth (education or social) of my child(ren).
- I understand that it is my responsibility to comply with requests parent conferences, phone calls, requested meetings, or behavior plan.

Parent Initials _____

Family Handbook

- I have been given a copy (electronically) of the Woodpark Montessori Family Handbook. I have read the handbook and all the policies and procedures. I understand and am aware of the terms and conditions of enrollment, which together with this Enrollment Agreement constitutes a binding agreement between Woodpark Montessori and the undersigned.

Parent Initials _____

Tuition Policy

- Woodpark Montessori's tuition may change with a notice of 30 days.
- I understand that the infant rate will apply until my child turns 16 months old.
- Payment is due by the 1st of each month. Parents who wish to pay tuition in two installments per month should pay the first half on the 1st and the second half on the 15th.
- All families must be signed up for automatic payments via a bank account to attend Woodpark Montessori.
- Parents are responsible for tuition payments whether they receive a statement or not. If you do not receive a monthly statement, contact the administrative office.
- Families receiving county, state or scholarship funding must follow these same payment policies.

Parent Initials _____

Discount Policy

- **Sibling Discount:** Woodpark Montessori offers a sibling discount to any family with 2 or more children enrolled in the program at the same time. A 10% sibling discount is given on the least expensive tuition. The sibling discount cannot be combined with any other discount or offer.
- **Discounts are not given on non-tuition charges, such as application fees, field trips, dance, transportation, county/scholarship co-pays, stay & play, late pick-up fees, or late payment fees.**

Parent Initials _____

Fees and Other Policies

- Application Fee: When you hand in a new application for enrollment you will be charged a \$200 application fee. This fee will be used to reserve your enrollment in Woodpark Montessori's program.
- Annual Re-Registration Fee: Annually each child who will be enrolled during the new school year will be charged a \$200 re-registration fee.
- Annual Activity & Material Fee: Annually each child who will be enrolled during the new school year will be charged a \$100 activity & material fee.
- Stay and Play Fees: A stay and play fee will be charged each time a child is clocked-in or clocked-out outside of their scheduled arrival and departure time. This will be charged at a rate of \$1 per minute.
- Late Pick-Up Fees: A late pick-up fee will be charged to each child in attendance after 6:00pm and will be charged at a rate of \$2 per minute.
- Field Trip Fees: Woodpark Montessori may offer in-house and community field trips throughout the course of the year. A permission slip with the field trip description and cost will be given to each family. You are responsible to pay for the field trip, even if your child is absent on the day you signed up for. Field trips are optional and will be added to your monthly invoice.
- Late Payment Fee: Tuition that is not received by the tenth business day of the month will incur a late payment fee of \$50.00 per month. It is imperative that your tuition payments be kept current. Any past due tuition jeopardizes your child's enrollment in the school. Services will not be provided in the new month while still owing for a prior month. These services include childcare, hot lunch, dance, and field trips.
- Returned Checks/ACH Fees: There is a \$30.00 charge for declined EFT payments. There are no exceptions to this policy.
- Attendance Policy: Tuition is not attendance-based. Full tuition is billed even in the event of illness, holidays, vacations, or closings due to emergency situations, inclement weather, acts of God, classroom quarantines, or other time away from the program.
- Hold Fee: Each month a child takes a break, a fee of \$200 will be charged in addition to any prorated tuition for days attended in the month. The vacation fee will be charged at the beginning of each month. This fee is only offered in the summer. Discounts do not apply.
- Schedule Changes and Withdrawals: A written notice must be given/sent to the Director 30 days prior to a change or withdrawal. If you reduce your schedule or withdraw without a 30-day notice, your account will be charged your current schedule for 30 days. An increase in schedule does not require a 30-day notice.
- CCAP and Scholarships: Families receiving county, state or scholarship funding must follow the same payment policies as it relates to due dates for payments and late payment fees. CCAP families may give a two week notice of withdrawal. Families are obligated to be aware of any fees that are not covered by agencies, such as co-pays, field trips, special events, dance class, and hot lunches. CCAP families should also apply for Scholarships, and Scholarship families should also apply for CCAP.

I certify that I have read, understand, and accept all the terms and conditions described above.

Child(ren) Name(s): _____

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Tuition Express



BANK ACCOUNT AUTHORIZATION

We are excited to offer the safety, convenience and ease of Tuition Express®—a payment processing system that allows secure, on-time tuition and fee payments to be made from your bank account.

I (we) hereby authorize (school name) Woodpark - Burnsville to initiate debit entries to my (our) checking or savings account, indicated below. To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit union members: please contact your credit union to verify account and routing numbers for automatic payments.

Child Name(s) _____

Payer Name _____

Phone # _____

Address _____

City _____

State _____

Zip _____

Payment Schedule Option (Please choose one): 1st of each month 15th of each month Half on the 1st & half on the 15th

Bank or Credit Union Name _____

Checking Savings

XXXX _____

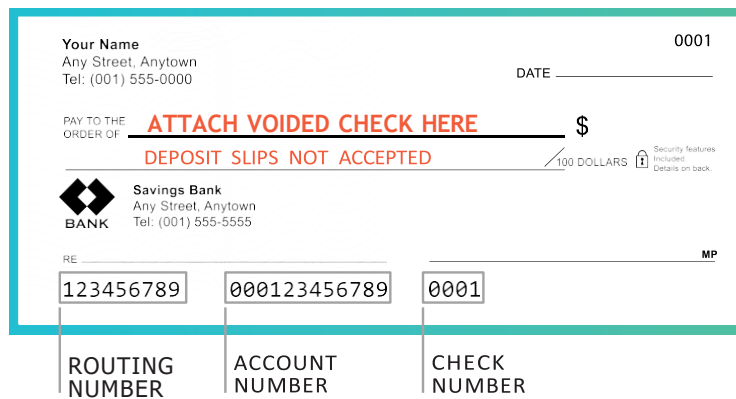
XXXXXXXX _____

Routing Number (Last 4 Digits ONLY)

Account Number (Last 4 Digits ONLY)

Authorized Signature _____

Date _____



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COMPLETION OF THIS SECTION REQUIRED BY PAYER

Routing Number _____

Account Number _____

Checking Savings

For Security, please...

Today's Date _____

Return this section of the Authorization Form.

Shred this section of the Authorization Form.