CHRIST LUTHERAN PRESCHOOL 311 So. Citrus Street, West Covina, CA 91791 626-967-7531, X229 www.clswc.org

2023-2024 PRESCHOOL

(July 1, 2023 – June 30, 2024)

Student Registration CONTRACT

Please complete this registration contract and return it to the school office along with the white Enrollment Card and the **$150 per student Non-Refundable** Registration Fee.

STUDENT'S NAME(S): _____

_____

_____

PRESCHOOL REGISTRATION INFORMATION SHEET

_____ (Please initial) I (We) have received and read the "Preschool" Student Registration Information sheet and understand the information regarding the Registration Fee requirement, Tuition Policy, Insufficient Funds Charge, Delinquent Accounts.

TUITION PAYMENT PLAN OPTIONS

(Please check one of the following Tuition Payment Plan Options)

Tuition rates are published on the enclosed 2023-2024 Tuition Schedule Sheet.

_____ *TIER 1: Discount Payment Option (Enrollments by March 15, cash or check only)* - Monthly payments – Due the first day of each month and late if paid after the 10th of the month. Families enrolling by March 15 will receive a discounted tuition rate.

_____ *TIER 2: Regular Payment Option (Enrollments after March 15, cash, check or credit card)* - Monthly payments – Due the first day of each month and late if paid after the 10th of the month.

Failure to pay on time may result in suspension from school. Delinquent tuition will be subject to a $35 late charge.

FAMILY COMMITMENT AGREEMENT

(Please check one commitment option)

_____ I **will** complete the Family goal and earn 20 points

_____ I am **unable** to participate in the points program. I will contribute $200 to the school by October 1, 2023.

PRE-KINDERGARTEN ENROLLMENT POLICY

It is the recommendation of CLS that all students who are enrolling in Pre-K and who will observe their **5th birthday by September 15th**, attend a minimum of 5 half days. We understand that constraints of family budgets may make this prohibitive, however, we want parents to understand that if the child attends less than 5 half days, the child may not receive the full benefit of the reinforcement of new concepts which are introduced at the beginning of the week. This suggests that the child may not be fully prepared for the student evaluation which occurs in January.

_____ (Please initial) I (We) have read and understand the above policy regarding Pre-Kindergarten Enrollment.

WITHDRAWAL/ENROLLMENT CANCELLATION POLICY

The person who is financially responsible for all monthly fees will be liable for the entire month's tuition unless written notice of withdrawal is made two weeks in advance and is given to either the Preschool Director or the School Bookkeeper.

_____ (Please initial) I (We) have read and understand the above policy regarding Christ Lutheran Preschool's Withdrawal Enrollment Cancellation Policy.

ARRIVAL POLICY

I understand and acknowledge that the preschool program begins **at 8:30 a.m.** I will make every effort to have my child at school by 8:30 a.m., to avoid disruption of the classroom program.

_____ (Please initial) I (We) have read and understand the above policy regarding my child's arrival time.

PRESCHOOL CHANGE OF SCHEDULE

I understand that I may change my child's schedule one time during the school year, free of charge after their initial registration. A scheduling fee of $15 will be applied for each additional schedule change during the school year. All changes will be effective the first of the month.

_____ (Please initial) I (We) have read and understand the above policy regarding Preschool Change of Schedule.

SPECIAL DAYCARE POLICY

Policy: *"It is the intention of Christ Lutheran School to offer special day care during the Christmas and Easter vacations, only if there is sufficient enrollment by the CLS families to cover the cost of the program. However, Christ Lutheran School reserves the right to cancel Special Daycare for either Christmas or Easter vacation.*

Cancellation will occur if by two weeks prior to the Christmas or Easter vacation, enrollment is not at a number that the administration deems necessary to adequately cover the cost of the program. Christ Lutheran School will notify enrolled families the next working day of the cancelled Special Daycare."

I understand I am responsible for signing my child up for Special Daycare during the Christmas and Easter vacations. I understand there will be a separate charge for the two weeks at Christmas and the one week at Easter. I also understand that if there is insufficient enrollment to cover the cost of the program, Special Daycare may be cancelled.

_____ I (We) have read and understand the above policy regarding Special Daycare.
(Please initial)

PRESCHOOL LUNCH PROGRAM

The lunch program at Christ Lutheran Preschool allows each preschool student to have the following options:

- Bring a cold lunch from home <u>or</u>
- Participate in the hot lunch program for an additional charge – 20 lunches for $100.

_____ I (We) have read and understand these options and information, as described on the Registration Information sheet.
(Please initial)

PRESCHOOL ONLINE COMMUNICATIONS

(Please circle either *YES* or *NO)*

- I (We) agree to participate in the use of Christ Lutheran Preschool's online communications tool, "Class Dojo", as a means to inform me (us) and the preschool classroom community of daily class activities, photos and events as well as group and individual student progress. *YES NO*

USE OF PHOTOS

(Please initial one of the following)

_____ I (We) give Christ Lutheran School permission to use our child's name, photo or quote on the school's website, Facebook/Twitter/Instagram accounts or publications (i.e., calendar, Friday Forecast, Charger) throughout the school year, with no monetary compensation.

_____ I (We) do not give permission to Christ Lutheran School to use our child's name, photo or quote on any school related media or publication and understand that this choice will exclude your child from any photos taken in class, Christmas programs, Honor Roll Assemblies, CLS sports events or any other school related photos or publications.

FAMILY INFORMATION RELEASE

(Please circle either *YES* or *NO)*

- My name or my child's name, address and telephone number may be released for school related events such as classroom activities or parent directory only. *YES NO*

By signing below, I acknowledge that I have reviewed this contract, and agree to abide by the provisions of this contract.

NAME & SIGNATURE OF PERSON FINANCIALLY RESPONSIBLE FOR ALL MONTHLY FEES IS REQUIRED

(Please Print) Signature Date

Mother's/Guardian's Name (Please Print) Signature Date

Father's/Guardian's Name (Please Print) Signature Date