

RUMC PRESCHOOL REGISTRATION

I understand there is a \$30 non-refundable registration fee required on an annual basis

Child Information:

Child's Name: _____

Age: _____ Sex: _____ Date of birth: _____

Child's home address: _____

Home email address: _____

Home phone: _____

Primary Contact and Release Persons:

Parent/Guardian #1: _____

Relationship to child: _____

Address: _____

Home/Cell Phone: _____ Email address: _____

Employer: _____ Work phone: _____

Employer Address: _____

Parent/Guardian #2: _____

Relationship to child: _____

Address: _____

Home/Cell Phone: _____ Email address: _____

Employer: _____ Work phone: _____

Employer Address: _____

Other children in the family:

Name: _____

Age: _____

Name: _____

Age: _____

Name: _____

Age: _____

Name: _____

Age: _____

Emergency Contact Information:

Please list the individuals you would like contacted if you cannot be reached in case of emergency. Additionally, please list those individuals you authorize for pick-up on a given day (i.e., babysitter). We will not release a child to anyone under the age of eighteen (18), including siblings.

Name: _____

Relationship to Child: _____

Home Phone/Cell Phone: _____

Address: _____

Name: _____

Relationship to Child: _____

Home Phone/Cell Phone: _____

Address: _____

Name: _____

Relationship to Child: _____

Home Phone/Cell Phone: _____

Address: _____

Name: _____

Relationship to Child: _____

Home Phone/Cell Phone: _____

Address: _____

If you want a person who is not identified above to pick up your child, you must notify school staff in advance. Your child will not be released without prior authorization.

Parent Signature

Date

Enrollment Agreement

Name of child: _____

Please initial each section listed below, then sign and date the page.

_____ **REGISTRATION FEE:** I understand that the \$30 registration fee is non-refundable and is required on an annual basis by the school.

_____ **PAYMENT OF TUITION:** I understand that tuition is \$110 per month, and payment is due on the first day of attendance each month.

_____ **DISCOUNTS:** I understand that if I have more than one child enrolled and attending from my immediate family, a discount from the usual tuition fee is offered to me and is applied to the additional child(ren). The tuition for each additional child will be \$55.

_____ **RETURNED CHECKS:** I understand that a processing fee will be charged to my account for all checking account payments which are returned for any reason, and this fee is in addition to any charges that my bank or financial institution may charge.

_____ **EMERGENCY CLOSING AND INCLEMENT WEATHER INFORMATION:** I understand that it is the school's intention to be open and provide pre-school programming, but that inclement weather, natural/national disaster, or major building issue may disrupt service from time to time. If Rittman schools are closed or on a 2-hour delay, the preschool will be closed for the day. If there is a major building issue that causes closure, I will be notified by the school ASAP.

Parent signature

Date