



Enrollment and Authorization Form

Child's Information

Last name First Name Middle Name Preferred Name

Gender (M/F) Birth Date Preferred Enrollment Date

Enrollment Options: Toddler – 3, 4, or 5 Half or Full Days Primary – 4 or 5 Full Days

Preferred Number of Attendance Days/ Week Top 3 Preferred Weekly Schedules
Please note After Care if desired

Current School and Grade Level

Siblings and Birth Dates

Child's Previous School(s)

Parent or Guardian Information:

Parent or Guardian Circle one: Father Mother Stepmother Stepfather Grandparent Other:

Last Name	First Name	Middle Name	Preferred Name
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Home Phone	Work Phone	Cell Phone
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Full Address

Preferred E-mail	Employer
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Parent or Guardian Circle One: Father Mother Stepmother Stepfather Grandparent Other:

Last Name	First Name	Middle Name	Preferred Name
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Home Phone	Work Phone	Cell Phone
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Full Address

Preferred E-mail	Employer
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What contact information (if any) would you like shared with other parents?

Name(s)	Contact Number	Contact Email
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If applicable, please indicate if there is a parent custodial plan in place. River Song School will adhere to this plan. Explain plan here:

Emergency Contact Information

We will ALWAYS try to contact parents first. However, we are required to have an emergency contact OTHER THAN PARENTS. These people are also authorized to pick up your child from the facility. Please list all appropriate phone numbers:

Name _____ Relationship _____

Phone _____/_____/_____

Name _____ Relationship _____

Phone _____/_____/_____

Name _____ Relationship _____

Phone _____/_____/_____

Non-Emergency Contact Information

Please list other that you authorize to pick up child in non-emergency situations:

Name _____ Relationship _____

Phone _____/_____/_____

Name _____ Relationship _____

Phone _____/_____/_____

Name _____ Relationship _____

Phone _____/_____/_____

Medical/Dental Information

Insurance Information and Provider (if applicable) _____

Primary Medical Provider _____ Phone _____

Primary Dental Provider _____ Phone _____

Health and Allergy Issues: _____

My Signature gives permission for the following:

In an emergency, River Song School has my permission to call an ambulance or to take my child to any available physician or hospital at my expense and to obtain medical treatment for my child. In most emergencies, 911 is called and child is transported to St. Charles Hospital and seen by Doctor on call. **(Parents are always notified immediately)**

Please list any restrictions to permission: _____

My child may be given non-prescribed medication as indicated on the container, including sunscreen, children’s pain reliever, and antibacterial first aid cream. Syrup of ipecac may be administered if deemed necessary by the poison control operator. **(We will contact parents prior to administering non-prescription pain relievers. Prescription and nonprescription medications must be current and require permission slips for each medication).**

During you and your child’s time at River Song School, these forms will be updated regularly to keep the most current information and emergency contacts for your child. Please do not hesitate to make as many changes as possible to fit you and your family’s needs and desires.

Enrollment Options

I wish to enroll my child for

_____ 10 months (September – June)

_____ 11 months (September – July)

_____ 12 months (September – August)

*If enrolling after January, we request enrollments through the following school year unless an exception is arranged with the Director.

Explanation of Fees

Due at Enrollment: \$150 one-time Enrollment Fee \$100 annual Materials Fee
\$350 Tuition Deposit (applies to first month's tuition)

Community Service Fee: River Song School is a nonprofit organization and parent volunteering supports our staff and students. Parents of all children enrolled at River Song School shall work five (5) hours of community service per semester or ten (10) hours per year either on site, or at home (approved in advance). Parents will be billed an annual \$100 Community Service Fee in fall. This fee is reimbursed based on completion Community Service hours.

Withdrawal from School: In consideration for the timely payment of the annual Tuition, all fees, and compliance with the policies of River Song School as explained in the River Song School Parent Handbook, the Student may withdraw from School and terminate this agreement under the following conditions:

1. A written letter of intent to withdraw is submitted the School accompanied by a \$250 non-refundable withdrawal fee. This letter shall be effective on the first day of the calendar month following the date of submission ("the Effective Date").
2. Thirty (30) days from the Effective Date, the Student shall be considered to have voluntarily withdrawn from the School ("the Withdrawal Date").
3. Any payments due after the Withdrawal Date shall be cancelled, except any outstanding balances accrued up to the Withdrawal Date.
4. After the Withdrawal Date, semester and annual payments as well as any prepayments, shall be refunded to the extent they exceed any tuition due under this contract.
5. All fees, including the Initial Enrollment fee, First Month's Tuition and the Re-enrollment fee, are non-refundable.

Late payments: In the event any payment shall be more than 15 days late, River Song School shall have the right to withhold any and all services for the Student and/or parent. The tuition

and any other costs that have not been paid are due immediately. A late fee of \$25 will be strictly enforced on payments received after the 7th of the month.

Mandatory Withdrawal Policy: River Song School may temporarily exclude or permanently terminate a Student's enrollment as follows:

Upon two weeks' notice for the following reasons:

- Parental failure to abide by school policies and/or this Agreement.
- School's program is not meeting developmental or special needs of the Student as determined by the Director.

Immediate withdrawal without prior warning may result for the following reasons:

- An account that is past due for fifteen days and/or disregard of tuition policies
- A pattern of late pick-up as determined by the administration
- Health or behavioral reasons on the part of the Student
- Conduct of parent, guardian, or a Student that the school administration, at its sole and absolute discretion, determines is threatening to the well-being, safety, or stability of the students or staff.

Please check the payment plan you desire: Refer to the Tuition Rates posted on the website for assistance in calculating the amount due.

_____ **Single Payment Plan:** A single payment of \$_____, which represents the sum of the tuition plus before and/or after school options. This payment is due on or before September 1. I have the option of handling this payment by personal check or credit card through Paypal.

_____ **Semester Payment Plan:** Two equal payments of \$_____, which represent the sum of the tuition plus before and/or after school options. This first payment is due on or before September 1 and the second payment is due the first school day of January. I have the option of handling this payment by personal check or credit card through Paypal.

_____ **Monthly Payment Plan:** Ten, Eleven, or Twelve consecutive monthly payments of \$_____, which represent the sum of the tuition plus before and/or after school options. The first payment is due on or before and the remaining payments are due on the first day of each month, ending in June, July, or August. I have the option of handling this payment by personal check or credit card through Paypal.

School Fees already paid upon acceptance (non-refundable): \$_____

Total amount of tuition made payable to River Song School: \$_____

To help us meet you and your child’s needs, please answer the following questions as completely as possible, using additional pages if necessary. Many of these questions are required by the State Child Care Division. All answers are strictly confidential and are used to provide the best possible experience for you and your child. Thank you.

Please give any information concerning your child which will assist us in providing the best care for your child:

Play_____

Eating habits and
schedule_____

Sleeping habits and
schedule_____

Toileting habits and
schedule_____

Fears_____

Likes and dislikes_____

Calming and Soothing
Techniques_____

Other: _____

Please initial the appropriate lines:

_____ I **grant** permission for my child's photo to be used in River Song School's newsletter, website, and advertisements.

_____ I **do not grant** permission for my child's photo to be used in River Song School's newsletter, website, and advertisements.

_____ My child **may** be taken on neighborhood walking excursions, under required supervision.

_____ My child **may not** be taken on neighborhood walking excursions and I will make necessary arrangements for alternative care when necessary.

By signing below I acknowledge that I am enrolling my child in River Song School. I have read the Parent Handbook and agree to follow the policies. I release my right to sue River Song Montessori Inc, its governing board, employees, administrators, volunteers, or students and release River Song Montessori Inc. from any liability relating to injury, property damage, or death.

Parent/Guardian Signature and Date

Parent/Guardian Signature and Date

Please e-mail: riversongschool@live.com Questions: 541.647.2739

River Song School does not discriminate against any child on the basis of race, religion, color, national origin, gender, marital status of parent or because of a need for special care

