

Office Use

Room Assignment _____

Start Date _____



School-Year Enrollment Form 2020-21

(September 2020-June 2021)

Child's Name _____ Date of Birth _____
First Last

Address _____
Street City State Zip

Telephone Number _____ Age (As of 8/31/20) _____

Email Address _____

Note: By providing a email address you are giving permission to be included on the Go2s email list and will receive tuition statements via email (paperless option).

Current Families: Check here if email address above is a new email address.

Allergies (i.e. Food/Medications/Seasonal) _____

Note: Any diagnosed allergies will require additional medical documentation to be completed and placed in child's medical file.

Special requests/accommodations (IFSP/IEP, dietary needs) _____

Note: Please use back of this form to elaborate on allergies or special requests. A Meet & Greet will be scheduled with your child's teacher to discuss your child's individual needs.

Schedule for School-Year 2020-21 (Place a checkmark to indicate schedules.)

	<u>Full-day</u> 6:30 a.m.-6:30 p.m.	<u>Core Day</u> 9 a.m.-3 p.m.	
Hummingbirds/Chickadees (8 wks-23 months)			School Age/Public Pre-K (M-F)
Monday-Friday Only	_____	_____	Before & After _____
Goldfinches, Robins, Cardinals (24 months-5 yrs.)			Pre-K Before & After _____
Monday-Friday	_____	_____	<u>Grade as of 8/31/20 (circle below)</u>
Monday/Wednesday/Friday	_____	_____	Pre-K K 1 2 3 4
Tuesday/Thursday	_____	_____	

Note: Part-time enrollment is available on a limited basis.

Initial tuition payment method preference below:

- _____ I agree to pay quarterly based on the current enrollment rates less a 5% discount.
- _____ I agree to pay monthly early bird based on the current enrollment rates less a 3% discount.
- _____ I agree to pay monthly based on the current enrollment rates less a 1% discount.
- _____ I agree to pay bi-weekly (every other Monday) based on the current enrollment rate.

Blue Jays (Preschool-Hours-Only 9:00 a.m.-1:00 p.m. —3 -5 years)

- 5-day (Monday-Friday) _____
- 3-day (Monday/Wednesday/Friday) _____
- 2-day (Tuesday/Thursday) _____

_____ I agree to pay the monthly preschool tuition rate due 1st of every month.

Initials _____

Parent/Guardian Signature _____ Date _____

Office use \$ _____ Reg. Pd. _____ \$150 Deposit Pd. _____ \$ _____ Pre-Payment (if applicable) Pd. _____