

Ascension Lutheran Preschool
26231 Silver Spur Road
Rancho Palos Verdes, CA 90275
310-373-6083 www.ALCPreschool.org

2017 SUMMER FUN REGISTRATION & ADMISSION AGREEMENT

3 to 5 Year Old Program

June 27th through July 28th

The 4 Day Class is from 8:30 am to 12 pm on Tuesday, Wednesday, Thursday and Friday. No class on July 4th.

Tuition of \$450 is due on May 15, 2017 (exception: no charge to children registering at the preschool for the 2017-2018 academic year) and includes gymnastics once a week.

I would like to register my child for the Summer Fun Program:

Child's Name (Please Print) Male/Female

Birth Date Age on **6/27/17**

Address City Zip Home Phone

Mother's Name Mother's Cell/Work Number Mother's E-mail Address

Father's Name Father's Cell/Work Number Father's E-mail Address

Place of Birth Current Class Does your child have preschool experience?

Please read carefully and initial where indicated.

1. BASIC SERVICES

- 1.1 The school provides a program of activities, care and supervision designed to meet the developmental needs of average 2 through 6 year old children. The school includes supervised active and quiet play, teacher directed activities, encouragement of acceptable behavior and discouragement of unacceptable behavior, assistance in daily hygiene and personal grooming and a set of rules for the protection of child in participating in such programs. A snack will be served mid-morning. Please note that the School will care for only those children whose individual needs it is able to meet.
- 1.2 The school admits students of any race, color, and national or ethnic origin.
- 1.3 Assistance with taking medication will be given, provided the School has parent's written approval and instructions, and the medication comes to School in the original prescription bottle with the child's name, current date and all the information necessary for the School to give the medication properly. Over the counter medications will not be given without a note from the doctor on the doctor's stationery.

2. OPTIONAL SERVICE _____ initial

2.1 Day Care will not be offered during Summer School session.

3. PAYMENT PROVISIONS _____ initial

3.1 Tuition is due at the time of registration. This fee is non-refundable.

4. HOLIDAYS/DAYS CLOSED _____ initial

The school will be closed Tuesday, July 4th, in observance of Independence Day.

5. TERMINATION CONDITION _____ initial

5.1 Immediate – The School may terminate a child's enrollment in the School's program immediately upon notice to parent of such termination, if any of the following conditions arise:

- (a) In the sole judgment of the School Director, child's behavior threatens the physical or mental health or well-being of one or more of the other children at the School.
- (b) In the sole judgment of the School Director, any parent, in any way, prevents the school or staff members from carrying out its/her/his duties in a satisfactory manner.
- (c) In the sole judgment of the School Director, the school's program does not meet the individual needs of the child.
- (d) In the sole judgment of the School Director, the child's non-compliance of the rules would endanger his/her safety.

5.2 If the School terminates child's enrollment pursuant to paragraphs above, the tuition will be prorated and the remainder will be refunded.

6. TERM _____ initial

This agreement shall be in effect for the summer session or until the child is withdrawn from the School's program by parent, unless terminated sooner in accordance with the provisions of this agreement.

7. WAIVER OF COMPLIANCE _____ initial

No right under this agreement shall be waived (lost) merely by delaying or failing to exercise it.

8. STATE RIGHTS _____ initial

The Department of Social Services or any agency authorized by it, shall have the right and authority to interview children attending school or School staff and to audit child's or school's records without notice or prior consent, to observe the physical condition of children attending school and to have a licensed medical professional physically examine the school children, as part of the Department's regulation of licensed day care center. Parent acknowledges and understands such right.

The signature below as "Parent/Guardian" indicates this agreement has been read or has been read and explained to, the provisions of agreement and enter this agreement voluntarily.

Parent/Guardian **Date**

School Director **Date**

For office use only:
Tuition received _____ cash _____ Program: _____