

BROADWAY PRESCHOOL ENROLLMENT FORM

209 W. Broadway Blvd. · Sedalia, MO 65301 · 660-619-1708

Child's Full Name _____ **Birth Date** _____

Name child is called/should learn to write _____ Gender Male Female

Home Address _____ City/Zip _____

Phone _____

How did you hear about us? _____

Parent's Name _____ **Occupation** _____

Home Address _____ City/Zip _____

Home E-mail Address _____ Cell/Pager _____

Employer _____ Hours _____

Work Address _____ Work Phone _____

Parent's Name _____ **Occupation** _____

Home Address _____ City/Zip _____

Home E-mail Address _____ Cell/Pager _____

Employer _____ Hours _____

Work Address _____ Work Phone _____

Child resides with _____

Siblings (Name/birth date) _____

Daytime care giver _____ Phone _____

Person(s) authorized to take child from Preschool:

_____ Phone _____

_____ Phone _____

_____ Phone _____

School will attend _____ Church Affiliation (optional) _____

Father's Signature _____ **Date** _____

Mother's Signature _____ **Date** _____

(over)

THREE, FOUR, AND FIVE-YEAR OLD PROGRAM - Must be 3 by August 1

- 5-DAY AM CLASS** MON/TUES/WED/THURS/FRI · 8:15AM-11:00AM
\$40 Enrollment Fee (Non-refundable); \$140 Tuition x 9 months
- 3-DAY AM CLASS** MON/ WED/FRI · 8:15AM-11:00AM
\$40 Enrollment Fee (Non-refundable); \$140 Tuition x 9 months
- 3-DAY PM CLASS** MON/ WED/FRI · 12:15PM-3PM
\$40 Enrollment Fee (Non-refundable); \$125 Tuition x 9 months

First month must be paid by July 1 to secure your child's spot.

Doctor _____ **Phone** _____

Address _____

Other medical needs/ Allergies _____

Special needs Yes No If yes, explain: _____

IN CASE OF EMERGENCY and parent cannot be reached, contact:

Name _____ Relationship _____

Address _____ Phone _____

Name _____ Relationship _____

Address _____ Phone _____

MEDICAL AND EMERGENCY CONTACT INFORMATION

1. I will be notified at once in case of accident or illness to my child, and I will make arrangements for medical care of my child.
2. If I cannot be reached to make necessary arrangements or in a critical emergency requiring medical care, I authorize **Broadway Presbyterian Preschool** to contact my physician or Bothwell Regional Health Center.
3. I must give written permission for field trips, and I will be notified when they are planned.
4. I have received a copy of this facility's policies pertaining to the admission, care, and discharge of children.
5. I have been informed that a copy of licensing rules for childcare centers is available at this facility for review.
6. The provider is available for continuing communication regarding my child's development, behavior, and individual needs.
7. When my child is ill, I understand and agree that s/he may not be accepted for care or remain in care.

ELIGIBILITY (Initial on all the yellow highlighted lines once you have read them.)

1. No circumstance of nationality, race, or religion is considered as a basis for acceptance.
2. There is a six-week trial period for the three-year-old student.
3. Child MUST be fully toilet trained.
4. Immunization requirements for Preschool children must be turned in before attending school.
 - a. Student may not attend classes until immunization form or exemption for is submitted.
 - b. Unimmunized children are exempt from class when they:
 - I. Have a reportable disease OR
 - II. Are liable to transmit a reportable disease.
 - c. Readmission to class is permitted by one of the following methods:
 - I. certification in writing by an attending physician attesting to the student's non infectiousness.
 - II. Being exempt from class the length of possible incubation periods. Exemption may be 21 days or longer depending on the reportable disease.
 - III. Local health authority declares that the designated healthy emergency is ended.
5. Until set for the school year by the Board, tuition is subject to change.
 - a. Parents/Guardians are responsible for tuition even if there are class cancellations or student's miss due to illness or any other reasons.

TUITION

1. Yearly tuition is set by the Preschool Board. They yearly tuition is divided into nine monthly installments. The installments are not reflective of the days attended in the month, but rather 1/9th of the total tuition fee. Tuition is due on the first of each month, beginning August 1st (for September) and should be paid in full by May 1st.
 - a. If you would like to pay your student's tuition in full, or arrange another payment plan, please contact the church office to set that up.
 - I. Early Enrichment Yearly Tuition is \$810. Nine monthly payments of \$90.
 - II. Pre-Kindergarten Yearly Tuition is \$1,260. Nine monthly payment of \$140.
 - III. Mixed Age Yearly Tuition is \$990. Nine monthly payments of \$110.
2. Enrollment fee must be paid in full to secure your child's spot. \$40 for all classes.

I have read and understand the terms of Eligibility, Tuition, Medical and Emergency Contact at Broadway Preschool and agree to the terms.

Signature of Parent/Guardian _____