**2019-2020 School Year**

**Preschool Registration Form – *New families***

**Child Name: Parent/Household Name:**

***Preschool ½ Day (8:00am-12:15pm):***

|  |  |  |  |
| --- | --- | --- | --- |
| **Days** | **Cost for School Year** | **9-Month payment plan****(September-May)** | **Selection *(circle days)*** |
| 5 days/week | $3,335 | $370 | Monday-Friday |
| 4 days/week | $2,970 | $330 | M T W TH F |
| 3 days/week | $2,520 | $280 | M T W TH F |

***Preschool 3/4 Day (8:00am-3:00pm):***

|  |  |  |  |
| --- | --- | --- | --- |
| **Days** | **Cost for School Year** | **9-Month payment plan****(September-May)** | **Selection *(circle days)*** |
| 5 days/week | $5,265 | $585 | Monday-Friday |
| 4 days/week | $4,590 | $510 | M T W TH F |
| 3 days/week | $3,960 | $440 | M T W TH F |

***Preschool Full-day (8:00am-5:30pm):***

|  |  |  |  |
| --- | --- | --- | --- |
| **Days** | **Cost for School Year** | **9-Month payment plan****(September-May)** | **Selection *(circle days)*** |
| 5 days/week | $6,390 | $710 | Monday-Friday |
| 4 days/week | $5,355 | $595 | M T W TH F |
| 3 days/week | $4,275 | $475 | M T W TH F |

***Deposit required to hold the spot: $250 at time of signing registration form (refundable)***

* *Deposits will be refunded by check no later than June 30, 2020 if the account has a zero balance.*
* *An account balance as of May 30, 2020 will be paid with the deposit, and any remaining funds will be refunded to the adult on the child’s SPRD account.*
* *A family may choose to roll over their deposit for the next school year if they plan to stay in the program*

***Supply Fee required: $100.00 at time of signing the registration form (non-refundable)***

***Preschool After-school Care (until 5:30pm):*** *Punch cards will be available at the preschool for hourly after-school care. Punch cards cost $40 for 5 hours (price subject to change). Buying a punch card does not guarantee space is available, so you must speak with your preschool teacher to get prior approval before using after-school care services.*

***Important Program Notes:***

* *Any changes to your child’s preschool schedule during the school year requires a “Change Registration form” be signed by your preschool teacher and returned to the SPRD administrative office.*
* *Changes to your child’s preschool schedule may go into effect immediately upon teacher approval, however the monthly payment plan will not be adjusted until the 1st of the next month.*
* *If families pay for the full year upfront and choose to leave the program mid-year, a $100 processing fee will be charged and the remaining paid balance will be refunded within 30 business days.*

**Parent Name Date:**

**Parent Signature Date:**

**2019-2020 School Year**

**Preschool Payment Plan Form**

**Child Name: Parent/Household Name:**

**Address:**

**Phone Number: Payment Amount: $ (annual / monthly)**

 ***Circle one***

**Payment Options (select one):**

|  |  |
| --- | --- |
| **Selection** | **Payment Option** |
|  | I will pay one full payment upfront for the school year (5% discount) |
|  | Auto-charge selected debit/credit card on the 10th of the month (Sept 2019 – May 2020) |
|  | I will pay by the 10th of the month in person or by phone (Sept 2019 – May 2020) |

**Late Fee:**  I acknowledge that I will be assessed a late fee of $15 if my account is not paid in full by the 15th of the month. (Please initial)

**Debit/Credit Card Payment Information (if choosing to auto-charge):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name on Credit Card:** | **Card Type:** | **Debit/Credit card number:** | **Expiration Date:** | **CV#** |
|  |  |  |  |  |

I, , give Sisters Park and Recreation District permission to
 Name on account being charged

auto-charge my credit card/bank account on the 10th of the month, consistent with the payment plan

above, during the months of September 2019 through May 2020.

Signature of Account Holder Printed Name Date

***For Office Use Only:* $250.00 DEPOSIT** *(refundable)* **\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_**

 **Paid Date**

**$100.00 SUPPLY FEE** *(non-refundable)* **\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_**

 **Paid Date**

***Received by: Date:***

***Classroom:***