

MT. EDGE CUMBE PRESCHOOL ENROLLMENT FORM 2022-23

Child's Name _____ Preferred First Name at School _____	
Birth Date _____ Current Age of Child _____	
Parent Name _____	Parent Name _____
Parent DOB/SSN _____	Parent DOB/SSN _____
Home Address _____	Home Address _____
Mailing Address _____	Mailing Address _____
Phone: Home _____	Phone: Home _____
Work _____ Cell _____	Work _____ Cell _____
May we contact you by text msg? Y N	May we contact you by text msg? Y N
Email address _____	Email address _____
Work location _____	Work location _____
Brothers & Sisters (names and ages): _____	

Please help us to know your child by sharing your observations, concerns, and suggestions:

My child's special talents, favorite things to do...

Things my child needs help with or avoids...

Things we like to do together as a family...

Has your child been in daycare or other preschool settings? What was it like?

Questions or concerns I have about my child...

What do you hope your child will experience here?

Who are the people in our family?

Is there other information about your family or child which you feel might be helpful for the staff to know?
(other languages spoken, parents living in separate households, custody arrangements, pets, fears, etc.)

PARENT AUTHORIZATION & PERMISSION

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ACTIVITIES & FIELD TRIP PERMISSION

Teachers take children on a number of outdoor activities & adventures. They visit beaches, Totem Park, Halibut Point Recreation area, the Science Center, the community playground, Castle Hill & many other places.

My child _____ has my permission to participate in all programmed activities for the 2022-23 school year, including field trips, while he/she is attending Mt. Edgecumbe Preschool.

BUS PERMISSION

My child _____ has my permission to ride the bus for Mt Edgecumbe Preschool sponsored activities for the 2022-23 school year.

PHOTO PERMISSION

Mt. Edgecumbe Preschool staff take photos every week of their class activities, adventures & interactions in the classroom. These photos are posted for parents on the Remini app & printed for children to make a journal throughout the year.

I give permission for photos of my child _____ to be taken during Mt. Edgecumbe Preschool program activities to be used in Preschool promotional and/or advertising materials, including the preschool website.

Please don't use photos of my child on social networking websites

PARENT HANDBOOK

Mt. Edgecumbe Preschool provided a 2022-23 school year Parent Handbook outlining the school and facility policies for my review.

I have read and understand the policies as outlined in the 2022-23 Covid-19 Policy Addendum of the Parent Handbook.

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Date _____

Signed _____
Parent or Guardian

Date _____

Signed _____
Parent or Guardian

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MT. EDGECUMBE PRESCHOOL TUITION CONTRACT 2022-23

REGISTRATION FEE: A \$35.00 registration fee per family per year is due at the time of initial registration. The \$35.00 is refundable only if the registration is cancelled before August 1.

CLASS SCHEDULE	TUITION RATES	
	4 days/wk	2 days/wk
Total School Year Class Tuition	\$ 3,600.00	\$ 2,160.00
Monthly Installments:		
Morning (8:30-11:30am) & Afternoon Class (1-4:00pm)	\$ 400.00	\$ 240.00
Full Morning 8:00-12pm <i>limited availability</i>	\$ 495.00	\$ 316.00
Full Morning 8:30-12pm	\$ 435.00	\$ 278.00
Full Day 7:45am-4:00pm <i>limited availability</i>	\$ 1,092.50	\$ 649.50
Full Day 8:00am-4:00pm	\$ 1,060.00	\$ 632.00
Full Day 8:30am-4:00pm	\$ 995.00	\$ 594.00
Friday Outdoor School 8:00-12pm <i>4yr old requirement, limited space</i>	\$160.00 per month	
Hourly Rate	\$ 12.00	\$ 12.00

TUITION POLICY:

- First and last month’s tuition is due at Parent’s Night Orientation. Tuition thereafter is payable in a lump sum for the school year or the first day of each month. Exceptions can only be made when a parent notifies the Preschool Office Manager and makes other payment arrangements. (To reduce expenses, we do not send out tuition invoices.)
- Exceptions to payment cannot be made for absence. Parents anticipating an extended absence may choose to withdraw the child.
- Two weeks notification is required to withdraw a child from school or to reduce scheduled attendance. There will be no May tuition refunds for a child leaving the program after March 1. *This requirement may be waved in the case of medical emergency or extended illness.*
- School may close for a public health emergency or natural disaster by government order or at the direction of the MEPS Board or the Executive Director. Parents will continue to be charged tuition for a closure of two weeks or less, or for the first two weeks of an extended closure. In the case of pre-paid tuition, no refund will be given for a closure of two weeks or less. For an extended closure pre-paid tuition will be fully refunded beginning the third week of the closure. Refunds for partial months will be calculated on a daily equivalent rate.
- If tuition payment has not been received or satisfactory payment arrangements have not been made within the month tuition is due, the child will not be able to attend preschool the following month.
- The signer of this contract is responsible for any tuition, fees, or co-pays not covered by Child Care Assistance, scholarships, or any other tuition assistance programs.
- Payments can be made by Credit/Debit Card, Cash or Check. Checks for tuition are to be made out to Mt. Edgecumbe Preschool and dropped off at the school or mailed to: *Mt. Edgecumbe Preschool, 129 Seward St., Sitka, AK 99835*

You help strengthen the preschool program by making prompt tuition payments on or before the 1st of every month.

I, _____ (Parent or Guardian 1) _____ (Parent or Guardian 2) agree to provisions in this 2022-23 school year Tuition Contract with Mt. Edgecumbe Preschool for my child _____

Parent or Guardian Signature _____ Date _____

Parent or Guardian Signature _____ Date _____

AUTOMATIC CREDIT CARD BILLING AUTHORIZATION FORM
for Mt. Edgecumbe Preschool, Inc.

If you would like to enjoy the convenience of automatic billing, simply complete the Credit Card Information section below and sign the form. All requested information is required. Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing authorization at any time by contacting us.

Customer Information (To be completed by merchant)

Customer/Child Account Name:

Parent/Custodian Name:

Phone:

Payment Information

I authorize Mt. Edgecumbe Preschool, Inc. to automatically bill the card listed below as specified:

Amount: \$ _____

Frequency:

Weekly Bi-Monthly Monthly

Semi-Annually Annually

Start billing on: _____ / _____ / _____

End Billing When:

Contract Expires _____ / _____ / _____

Customer Provides Written Cancellation

Credit Card Information

Credit Card Type:

Credit Card Number:

Expires:

_____/_____/_____

Cardholder's Name:

Cardholder's Zip Code (required):

(as shown on credit card)

(from credit card billing address)

Cardholder's Mailing Address

Cardholders's City & State

(from credit card billing address)

(from credit card billing address)

Customer's signature:

Date:

PARENT VOLUNTEER LIST

Parent involvement is essential for a quality preschool program. Please indicate how you can help. Mark all you are interested in:

1. Join the Board of Directors with other parents & alumni parents
2. Take preschool recycling as needed
3. Help maintain the preschool building (painting, repairs, special projects, etc.)
4. Build or repair toys, equipment, or furniture
5. Add a fish or two in our fish tank or improved the tank equipment
6. Help with field trips or special projects
7. Share special interests with the children. Some examples: musical instruments, singing, special hobbies, storytelling, your job, your pet, art projects, magic tricks!
Your special interest _____
8. Repair or make dress-up and doll clothes
9. Help with fundraisers such as the Winter Wreath & Garland sale or the Spring Pansy Sale
10. Help with scholarship fundraising
11. Make a donation of money or equipment
12. Be a Parent Helper in the classroom
13. Other _____

Student Enrollment Check-Off List:

- Completed Enrollment Form
- Emergency Card Completed or Updated & Initialed
- Immunization Records Submitted
- Registration Fee Paid
- Tuition – 1st and Last Month Paid
- Bring in Spare Clothes
- Receive Book Club Card