

Application for Admission

Step By Step Montessori – Corcoran

Instructions: Please print and fill out **both** sides of this form completely.

Parent Information

First		First	
Last		Last	
Relation to Child	Mother Father Grandparent Foster Other; Specify _____	Relation to Child	Mother Father Grandparent Foster Other; Specify _____
Email		Email	

Address Information

Address		Same as Primary Address	
City		City	
State, Zip		State, Zip	
Primary Phone	(____) _____ - _____ Mobile Home Work	Primary Phone	(____) _____ - _____ Mobile Home Work
Alternate Phone	(____) _____ - _____ Mobile Home Work	Alternate Phone	(____) _____ - _____ Mobile Home Work

Work Information

Employer		Employer	
Position		Position	

Other Information

Separate Ledgers	Does your family require separate ledgers per parent? Yes No
Custody Notes	

Child Information

First		Last	
Birthday or Due Date	____/____/____ Check if Due Date	Sex	Male Female
Child Lives With?		Special Conditions and Notes	
Child's Ethnicity		Child's Primary Language	
Allergies		Family Culture, Customs, and Language	

Program Information

Level	Infant (6 wks-15 mo)	Toddler (16 mo-32 mo)	Preschool (33 mo-6yrs)	School-Age (6-7yrs)
Program Days	Note: Infants and Toddlers must be on a 5 full or 5 extended schedule.			
	5 Day (M-F)	3 Day (M, W, F)	2 Day (T, Th)	
Program Times (Please select one)	Extended Day 6:30am – 6:00pm	Full Day 8:00am – 3:30pm	Half Day – AM 8:00am – 11:30am	Half Day – PM 2:30pm – 6:00pm (only available for School-Age)

The \$200.00 Application Fee and \$100 Activity and Material Fee will be processed via the EFT Form accompanying this application. This application fee is non-refundable. There is no refund in tuition for holidays, illness, vacation, or closings due to emergency situations, inclement weather, acts of God or other time away from the program. One month's written notice is required prior to withdrawal or for reduction in schedule. Any tuition not paid by the 5th of each month will incur a \$50.00 late fee. Endeavor Schools reserves the right to request a child withdraw from the program if, in the opinion of the school, the child does not adjust to the program, benefit from the program or if the family account is not in good standing. Any coupons must be submitted with this application. I understand and agree to the above terms.

I hereby authorize Step By Step to take my child to its source of emergency care or doctor, as listed on the Center Information Board, if they are unable to contact the person(s) or any of the emergency numbers listed. It is understood that in some medical situations, the staff will need to contact the local emergency resources before the parents, child's doctor, and/or an adult acting on the parent's behalf.

Parent/Guardian Signature _____ Date: ____/____/____

Parent/Guardian Signature _____ Date: ____/____/____

App Fee:	Date Rec'd:	Parent has Packet?	Yes No	Received By:	Waitlist	Yes
Start Date:	Classroom:	Current Parent?	Yes No		CRM?	Yes No

Enrollment Agreement

Step By Step Montessori Policies

- Step By Step Montessori's policies are subject to change.
- I understand a 30-day notice must be given to withdraw or change my child(ren)'s schedule.
- I agree to allow Step By Step Montessori to communicate with me by telephone, email, Procure Engage, or any means necessary in the best interest of my child(ren).
- Step By Step Montessori may disenroll a child(ren) without prior notice if; the handbook policies are not followed, tuition payments are not made, or if it is the sole opinion of Step By Step Montessori, that it is in the best interest of the child(ren) or Step By Step Montessori.
- If I fail to pick-up my child and/or contact the school, and I or another authorized pick-up person cannot be reached within 1 hour after closing time (6:00pm), school staff may release my child to the custody of child protective services or other local authorities.
- I understand that the staff at Step By Step Montessori are mandated reports and may send in a report in the best interest of a child(ren) to the proper authorities.
- I understand that the staff at Step By Step Montessori are mandated referrers and may send me a referral to any program they believe will be helpful for the growth (education or social) of my child(ren).
- I understand that it is my responsibility to comply with requests parent conferences, phone calls, requested meetings, or behavior plan.

Parent Initials _____

Family Handbook

- I have been given a copy (electronically) of the Step By Step Montessori Family Handbook. I have read the handbook and all the policies and procedures. I understand and am aware of the terms and conditions of enrollment, which together with this Enrollment Agreement constitutes a binding agreement between Step By Step Montessori and the undersigned.

Parent Initials _____

Tuition Policy

- Step By Step Montessori's tuition may change with a notice of 30 days.
- I understand that the infant rate will apply until my child turns 16 months old.
- Payment is due by the 5th of each month. Parents who wish to pay tuition in two installments per month should pay the first half on the 5th and the second half on the 15th.
- There is a 2% convenience fee for all credit/debit card transactions. There is no convenience fee with ACH payments from a checking or savings account.
- Parents are responsible for tuition payments whether they receive a statement or not. If you do not receive a monthly statement, contact the administrative office.
- Families receiving county, state or scholarship funding must follow these same payment policies.

Parent Initials _____

Discount Policy

- **Sibling Discount:** Step By Step Montessori offers a sibling discount to any family with 2 or more children enrolled in the program at the same time. A 10% sibling discount is given on the least expensive tuition. The sibling discount cannot be combined with any other discount or offer.
- **Corporate Discount:** Step By Step Montessori offers a corporate discount of 8% to the parent or guardian of a child currently enrolled in the program. Discounts are not retroactive. To receive the corporate discount, the employed parent/guardian must fill out the Corporate Discount form and return it to the Administrative Team. The corporate discount cannot be combined with any other discount or offer.
- **Discounts are not given on non-tuition charges, such as application fees, field trips, dance, transportation, county/scholarship co-pays, stay & play, late pick-up fees, or late payment fees.**

Parent Initials _____

Enrollment Agreement

Fees and Other Policies

- **Application Fee:** When you hand in a new application for enrollment you will be charged a \$200 application fee. This fee will be used to reserve your enrollment in Step By Step Montessori's program.
- **Annual Re-Registration Fee:** Annually each child who will be enrolled during the new school year will be charged a \$200 re-registration fee.
- **Annual Activity & Material Fee:** Annually each child who will be enrolled during the new school year will be charged a \$100 activity & material fee.
- **Stay and Play Fees:** A stay and play fee will be charged each time a child is clocked-in or clocked-out outside of their scheduled arrival and departure time. This will be charged at a rate of \$20 per hour and capped at \$200 per day.
- **Late Pick-Up Fees:** A late pick-up fee will be charged to each child in attendance after 6:00pm and will be charged at a rate of \$2 per minute.
- **Field Trip Fees:** Step By Step Montessori may offer in-house and community field trips throughout the course of the year. A permission slip with the field trip description and cost will be given to each family. You are responsible to pay for the field trip, even if your child is absent on the day you signed up for. Field trips are optional and will be added to your monthly invoice.
- **Late Payment Fee:** Tuition that is not received by the tenth business day of the month will incur a late payment fee of \$50.00 per month. It is imperative that your tuition payments be kept current. Any past due tuition jeopardizes your child's enrollment in the school. Services will not be provided in the new month while still owing for a prior month. These services include childcare, hot lunch, dance, and field trips.
- **Transportation Fee (Corcoran Location Only):** Any School Age child who uses the Step By Step Montessori bus at our Corcoran location will be charged \$50 per month.
- **School Release Day (Corcoran Location Only):** Any School Age child who attends during a school release day will be charged a \$45 flat rate per day they attend.
- **Returned Checks/ACH Fees:** There is a \$30.00 charge for returned checks and declined EFT and credit card payments. There are no exceptions to this policy.
- **Attendance Policy:** Tuition is not attendance-based. Full tuition is billed even in the event of illness, holidays, vacations, or closings due to emergency situations, inclement weather, acts of God, classroom quarantines, or other time away from the program. There are no discounts for any length of absence.
- **Schedule Changes and Withdrawals:** Written notice must be given/sent to the Director 30 days prior to a change or withdrawal. If you reduce your schedule or withdraw without a 30-day notice, your account will be charged your current schedule for 30 days. An increase in schedule does not require a 30-day notice.
- **CCAP and Scholarships:** Families receiving county, state or scholarship funding must follow the same payment policies as it relates to due dates for payments and late payment fees. CCAP families may give a two week notice of withdrawal. Families are obligated to be aware of any fees that are not covered by agencies, such as co-pays, field trips, special events, dance class, and hot lunches. CCAP families should also apply for Scholarships, and Scholarship families should also apply for CCAP.

I certify that I have read, understand, and accept all the terms and conditions described above.

Child(ren) Name(s): _____

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____

BANK ACCOUNT AUTHORIZATION

We are excited to offer the safety, convenience and ease of Tuition Express®—a payment processing system that allows secure, on-time tuition and fee payments to be made from your bank account.

I (we) hereby authorize (school name) Step By Step – Corcoran to initiate debit entries to my (our) checking or savings account, indicated below. To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit union members: please contact your credit union to verify account and routing numbers for automatic payments.

_____ Check for Auto-Pay Check for Self-Online Pay
Child Name(s)

_____ Phone #
Payer Name

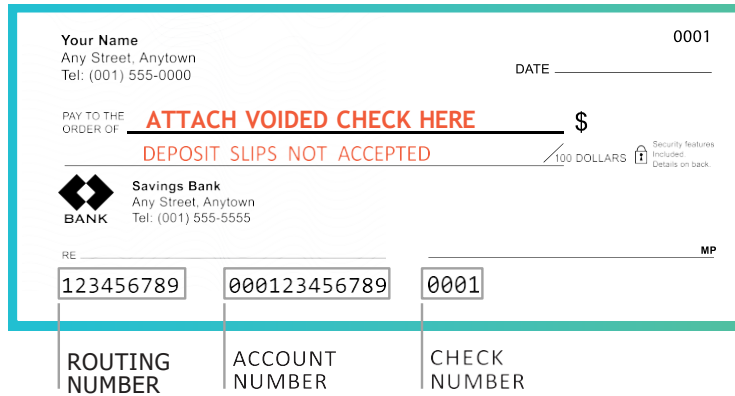
_____ City _____ State _____ Zip
Address

Payment Schedule Option (Please choose one): 5th of each month 15th of each month Half on the 5th & half on the 15th

_____ Checking Savings
Bank or Credit Union Name


XXXX _____ XXXXXXXX _____
Routing Number (Last 4 Digits ONLY) Account Number (Last 4 Digits ONLY)

_____ Date
Authorized Signature



Your Name _____ 0001
Any Street, Anytown
Tel: (001) 555-0000 DATE _____

PAY TO THE ORDER OF ATTACH VOIDED CHECK HERE \$ _____
DEPOSIT SLIPS NOT ACCEPTED /100 DOLLARS Security features Included. Details on back.

 **Savings Bank**
Any Street, Anytown
Tel: (001) 555-5555

RE _____ MP

123456789	000123456789	0001
ROUTING NUMBER	ACCOUNT NUMBER	CHECK NUMBER

< Cut Here >

COMPLETION OF THIS SECTION REQUIRED BY PAYER

_____ Checking Savings
Routing Number Account Number

_____ Today's Date
For Security, please...

Return this section of the Authorization Form.

Shred this section of the Authorization Form.

Tuition Express



CREDIT CARD AUTHORIZATION

We are excited to offer the safety, convenience and ease of Tuition Express®—a payment processing system that allows secure, on-time tuition and fee payments to be made from your credit card.

I (we) hereby authorize (school name) Step By Step – Corcoran to initiate debit entries to my (our) credit card, indicated below. To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice.

Child Name(s) Check for Auto-Pay Check for Self-Online Pay

Payer Name Phone Number

Address City State Zip

Payment Schedule Options (Please choose one): 5th of each month 15th of each month Half on the 5th & half on the 15th

Credit Card Number (Last 4 Only) Expiration Date

Accepted Card Types

VISA

MASTERCARD

DISCOVER

Authorized Signature Date

There is a 2% processing fee on all credit card payments.

..... < Cut Here >

COMPLETION OF THIS SECTION REQUIRED BY PAYER

Credit Card Number Expiration Date CCV

For Security, please... _____
Today's Date

Return this section of the Authorization Form.

Shred this section of the Authorization Form.