

Registration & Contract Form

Child's Name: _____

Address: _____ City: _____ Zip: _____

Birthdate: _____ Age: _____ M F

Mother's Name: _____

Address: _____ City: _____ Zip: _____

Employer: _____ DL#: _____

Home Phone: _____

Work Phone: _____

Email: _____

Father's Name: _____

Address: _____ City: _____ Zip: _____

Employer: _____ DL#: _____

Home Phone: _____

Work Phone: _____

Email: _____

Person assuming care and custody: _____

Attendance Schedule

Mark what class you prefer by #1 your first choice #2 second choice, and so on. You will be notified which class your child will be in by August 1st. Your #1 choice is not guaranteed, but we will try to honor it. **If a certain class does not work for your child/family, please indicate the reasons below.** Class placement is based on order of enrollment, class preference, boy/girl ratio's, and class size.

3-year old's

T/TH am _____

M/Wam _____ (older 3's teacher approval only)

T/THpm _____ (older 3's teacher approval only)

Notes: _____

4-year old's

M/W/F am _____

M/W/F pm _____

M/W/F All day _____

T/W/TH/F pm _____

M-F pm _____

*T/TH pm _____ (this class is an add on to the M/W/F am class or the M/W/F all day class)

Notes: _____

Tuition and Payments:

3-year-olds

T/TH am or M/W am \$130.00/month

T/TH pm \$140.00/month

4 year olds

M/W/F AM \$160.00/month

M/W/F PM \$175.00/month

T/W/TH/F PM \$200.00/month

M-F PM \$225.00/month

M/W/F Full day \$300.00/month

*T/TH PM \$ 60.00/month (this is an add on class to M/W/F am or All Day class)

To hold your child's spot there is a Non-Refundable Registration Fee of \$50.00. After Sept 1st 1.5 months of tuition will be due at the time of registration.

Tuition is due by the 1st of each month in the silver box outside the preschool door. Make checks to Shining Light Christian Preschool. I do accept cash as well as credit cards (tuition only).

1. Septembers tuition will be for September and for June (which is a half month tuition). Total tuition for September will be 1.5 months of tuition.
2. Any student starting after September 1st will need to pay 1.5 months' tuition up front (no deposit).
3. If paying extra tuition in September is an issue, please talk to me before September and we can work out a payment schedule.
4. Tuition is always due on the 1st of every month. Payments will be late after the 5^h of each month and late fees will be assessed.
5. Any invoices not paid by the 5th of each month will be assessed a ten dollar (\$10) a day late fee. If full tuition plus late fees are not paid by the 10th of each month, services will be suspended. To regain your child's spot, the full tuition, plus a one hundred-dollar (\$100) re-instatement fee must be paid prior to their return, provided their space is still available. NO EXCEPTIONS WILL BE MADE FOR LATE PAYMENTS.
6. All returned checks have a \$35.00 charge and cash must be paid for all other tuition payments.
7. A 10% monthly discount* is given to a family who has more than one child enrolled.
8. A 15% monthly discount* is offered it RLCC members.
9. A \$50 discount is given for tuition if the whole year is paid upfront by August 20th.
10. June's tuition will be prorated if school year ends before June 20th otherwise full month is due.

**one discount per family*

Late Pick-ups:

Being late to pick-up your child will not be permitted. Occasional (once a month or less) is to be tolerated. If you are going to be late, please call or text and leave a message on the school phone 541 306 9484 this is the only way to avoid late charges and will only be allowed once a month unless a totally unavoidable circumstance arises.

1. Child must be picked up by 5 minutes after class is dismissed (time is by the school clock).

2. \$1.00/minute will be charged for the 1st 5 minutes after that.
3. \$5.00/minute will be charge for anything after 10 minutes late.
4. Only 3 late occurrences will be permitted each month. Any more than this and fines are doubled.
5. Late fee charges for your child will be due in cash by the last day of school that week. If late fee is not paid your child will not be allowed to return until the full late fee is paid plus a fifty-dollar (\$50) re-instatement fee is paid in cash.

Withdrawals:

Parents may withdraw a child from the preschool at any time a ***ONE MONTH WRITTEN NOTICE IS REQUIRED FOR REFUND***. Last months tuition is refundable until December 31st with a one month written notice. After this date, you will not receive a refund unless your spot is filled before your child is withdrawn, but it may be used for half of your last month’s tuition. You will be responsible for paying for the 2nd half of your child’s last month’s tuition at the time of your written notice.

Class Cancellation:

We reserve the right to cancel any class no later than August 25th if enrollment is not at a level that will maintain the class. You will receive a full refund of any deposit made.

Authorization for Medical Emergencies

I, _____, authorize Shining Light Christian Preschool to secure emergency medical and/or surgical treatment from a licensed physician and/or hospital for my child, _____ should such be necessary. I understand that all reasonable efforts will be made to notify me before such action is taken and agree that the result of such emergency care will be accepted by me.

Physician: _____ Phone: _____

Dentist: _____ Phone: _____

Insurance: _____

Policy Number: _____ Group Number: _____

Signature of parent/guardian: _____ Date: _____

Authorization for Transportation

I, _____, herby authorize Shining Light Christian Preschool to provide transportation in a private or public vehicle for my child, _____ for purpose of transporting during emergency purposes or for aftercare.

Signature of parent/guardian: _____ Date: _____

Enrollment Procedure:

The following forms and information must be submitted before enrollment to preschool is complete:

-registration & contract form

-Non-refundable registration fee (\$50) or 1.5 months of tuition if after Sept. 1st

No child's spot will be held without the non-refundable registration fee

Contract & Policy Agreement Form

I do hereby agree to the conditions set forth in the Contract & Policy agreement by Shining Light Christian Preschool.

Signed: _____ Date: _____
(Director)

Signed: _____ Date: _____
(Parent/Guardian)

Signed: _____ Date: _____
(Parent/Guardian)

Additional Information:
