

Items Needed With Registration Packet

_____ Copy of Current immunizations, form #3231

_____ Copy of all adult driver licenses authorized to pick up child

_____ Copy of child's birth certificate

_____ Copy of child's social security card

_____ Application/Registration Packet

_____ Half of 1st month's tuition (non-refundable)

_____ One time only Registration fee (non-refundable) and Yearly supply fee

SUMMER CAMP SUPPLY LIST

1. Comfortable, summer clothes.
2. Extra pair of clothing and shoes.
3. Indoor and outdoor closed toe shoes.
4. Water Bottle.
5. Lunch (morning and afternoon snack is provided)
6. Sun screen/Bug Spray.
7. Towel.
8. Toddler size sheet & blanket for rest time.
9. Water clothes/bathing suit with a shirt and bottoms.

Please label all of your child's items

2018 Summer Camp Registration – Meadows Montessori School

Ages 2-14

Student's Name -Last _____ First _____ MI _____

Name called: _____ Gender: Male Female

Birth date: _____

Home Address: _____ City, State, Zip: _____

(Full Address's Required)

Phone: _____

Child's Living Arrangements: Both Parents Mother Father Other _____

Name: _____

Name: _____

Home Address: _____

Home Address: _____

Mobile Phone: _____

Mobile Phone: _____

Occupation: _____

Occupation: _____

Business Phone: _____

Business Phone: _____

Employer: _____

Employer: _____

Business Address: _____

Business Address: _____

PRIMARY EMAIL ADDRESS

If parents are divorced, who has **legal custody**? Mother Father other _____

Who has **physical custody**? Mother Father other _____

Person responsible for **billing**: Mother Father other _____

Is child **adopted**? Yes No is he/she **aware of adoption**? Yes No

General health Significant medical history that we should be aware of: _____

Physical limitations/disease: _____

Please check if your child has or has ever had any of the following conditions:

Allergies-Yes/No (If **YES**-Allergic to _____)

Asthma Hay Fever Chicken Pox German measles Rheumatic fever

Mumps Scarlet Fever Whooping Cough

Please check if your child has or has ever had any of the following:

Taken medication for ADHD or ADD Received special services related to a disability

Received special program or services related to behavior

Child's Physician: _____ Telephone number: _____

Address: _____

Release-to Persons – These persons have permission to pick up the child when guardian(s) is not able to do so. In addition, **a copy of the release-to person’s driver’s license must be kept on file:**

**Full address is required.*

Name Relationship *Address Phone #

Emergency Contacts- These persons may be contacted in an emergency when guardian(s) may not be located:

**Full address required.*

Name Relationship Address Phone #

Photo Release Form for Minors (if under 18)

The **Meadows Montessori School** has my permission to use my or my child’s photograph publicly. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Parent/Guardian’s signature: _____ Date _____

Parent/Guardian’s Name: _____

Child’s Name: _____

Phone Number: _____

Please indicate the weeks in which your child(ren) will be attending.

Childs Name: _____

			Will Attend	
Week 1:	5/29-6/1 -	Nature & Water Fun	<input type="radio"/>	No school Memorial Day May 28 th .
Week 2:	6/4-6/9 -	Art & Water Fun	<input type="radio"/>	
Week 3:	6/11-6/15 -	Water Games	<input type="radio"/>	
Week 4:	6/18-6/23 -	Mad Scientist Week	<input type="radio"/>	
Week 5:	6/25-6/29 -	STEM	<input type="radio"/>	
Week 6:	7/2-7/6-	Summer Olympic Games	<input type="radio"/>	No school July 4 th .
Week 7:	7/9-7/13	Fun With Physics	<input type="radio"/>	
Week 8:	7/16-9/20	Baking Fun	<input type="radio"/>	
Week 9:	7/23-9/27	Games, Games, Games	<input type="radio"/>	

My child will attend the Full Day session _____.

My child will attend the Half Day session _____.

Registration & Supply Fees: \$30/child for the summer (NON-REFUNDABLE)

Full Day Summer sessions are \$190/week or \$40/day (\$150 the week of Memorial Day & July 4th)

Times: 6:30 am - 6 pm

Half Day Summer Sessions are \$150/week or \$30/day (\$120 the week of Memorial Day & July 4th)

Times 8 am - 2:00 pm

Mini Session Summer Sessions are \$125/week or \$25/day

Times are 8 am – 12 pm

Sibling Discount is 20% for all sessions.

Payment should be made no later than the beginning of each week of camp your child will be attending. Please make payment by check, cash or credit card. Late payment penalty is \$5/day. Credit Card payments incur a \$3.00 convenience fee. We do accept check and cash payments.

To hold your child’s spot, half of one week’s tuition is due at registration and is NON-REFUNDABLE.

PLEASE READ THIS CONTRACT BEFORE SIGNING
Terms of Enrollment

Other Fees:

One Time Supply Fee: \$30 (NON REFUNDABLE)

Credit Card Payment Fee: \$3.00 per charge

All tuition and other fees are due on the I* day of each month. If there is a school holiday on the 1st, please make payment before the 1st of the month. If paying weekly, payment is due on Monday of the school week. If there is a school holiday on Monday, please make payment the week before. Late payments will be assessed a **\$30** late fee per month or **\$10** per week for payments received after the 1st day of the month or after Monday, respectively. Checks returned by the bank will be assessed a **\$30** processing fee. Other incidentals are payable upon receipt of statements throughout the year.

Meadows Montessori School must rely on tuition to meet operating expenses. As a service organization, a major portion of the school's expense is related to mortgage, insurance, utilities, as well as teacher and staff salaries. Since salary obligations are contractual in nature and are based on income projected by each enrollment contract, it is essential that the income from tuition be assured for the entire year. For this reason, it is understood that a student is enrolled for the entire school year. If, for any reason, you must cancel enrollment during the school year, a minimum 2 week notice is required and a sum of one month's tuition is due in addition to current tuition to cancel this contract.

Students and parents are subject to all rules and regulations of the current student handbook. The tuition deposit submitted with this contract is **non-refundable**. If you are in breach of payment with any other contract you are considered in breach of payment on this contract.

ENROLLMENT MAY BE CANCELED IN WRITING BY THE PARENT OR GUARDIAN WITHOUT PENALTY (EXCEPT FORFEIT OF THE DEPOSIT AND REGISTRATION) PRIOR TO OR ON July 1st OF EACH CALENDAR YEAR FOR THE UPCOMING SCHOOL YEAR. IF ENROLLMENT IS CANCELED AFTER THE FIRST TWO WEEKS OF THE TRIAL PERIOD, PARENTS OR GUARDIANS ARE OBLIGATED TO PAY THE FULL TUITION CHARGES FOR THE CURRENT MONTH.

I agree to the above terms & conditions: _____ (sign)

_____ (print)

Date: _____



Meadows Montessori School

What we offer:

1. Ga Pre-K: 4 years old by September 1st
2. Primary Montessori Class: 2.5 – 6 years old
3. Infant Room: 6 weeks ~ 14 months
4. Toddler Room: ~14 months ~ 30 months
5. Mother's Morning Out: 6 weeks to 6 years old
6. Summer Camp: 2 – 12 years old
7. Loving staff, fun & educational curriculum and a safe environment. 8-12

Refer a friend that signs up, you and the friend get \$75 off one month's tuition. **\$75**

Email us at: Meadowsmontessori@yahoo.com

Check us out at: Meadowsmontessori.com or

<https://www.facebook.com/meadowsmontessorischool/>

Call us at: 770-218-6347

Come by: 111 Bells Ferry Lane, Marietta, GA 30066