



Enrollment Form

Enrollment Date: _____

Start Date: _____

CHILD'S INFORMATION

Child's Name _____ Date of Birth _____

Child's Home Address _____

City _____ Zip _____

FAMILY INFORMATION

Mother/Parent/Guardian Legal Name _____

Occupation _____

Home Phone _____ Mobile _____ Work _____

Email _____ CDL _____

Father/Parent/Guardian Legal Name _____

Occupation _____

Home Phone _____ Mobile _____ Work _____

Email _____ CDL _____

Standard Programs

- | | |
|---|---|
| <input type="checkbox"/> Toddler (18 – 30 months) | <input type="checkbox"/> Pre-Kindergarten |
| <input type="checkbox"/> Early Pre-School (2 ½ - 3 ½) | <input type="checkbox"/> Kindergarten Before and After School |
| <input type="checkbox"/> Early Pre-School (3 ½ - 4 ½) | |

Enrichment Programs

- | | |
|--|---|
| <input type="checkbox"/> Spanish | <input checked="" type="checkbox"/> Tiny Techs Computer (Included for 3 ½ and up) |
| <input type="checkbox"/> Tuff Tumblers | <input checked="" type="checkbox"/> Music (Included for all age groups) |



Enrollment Form

Attendance Schedule

Full Days 6:30 am – 6:00 pm

Half Days 8:00 am – 12:00 pm

5 Full Days

5 Half Days

4 Full Days Select: M T W TH F

4 Half Days Select: M T W TH F

3 Full Days Select: M T W TH F

3 Half Days Select: M T W TH F

2 Full Days Select: M T W TH F

2 Half Days Select: M T W TH F

Add Extended Preschool (12:00 pm – 3:00 pm)

Available for ages 4 – 5 only

Other _____

CONTRACT AGREEMENT

Tuition will be \$_____ per month. I agree that tuition will be paid in advance on the 1st and the 15th of each month. The first half of tuition is due on the first day of attendance. A \$10.00 fee is applied per month for late payments. A \$25.00 returned check fee is applied for all returned checks. A NON-REFUNDABLE registration fee of \$75.00 per child will be collected to enroll your child. This fee will not be refundable if your child(ren) does not continue. To ensure a quality program, make-up days are not allowed. Additional days may be added based on the daily rate and if there is a spot available. A two week notice is required to withdraw your child. A 10% discount in tuition is given for a second child. A \$1.00 per minute late fee is charged for late pickups. You may be asked to withdraw your child from the program after the 5th late pick-up. There will be no refund of tuition for any reason.

I take responsibility for payment of tuition and agree to follow the requirements above. I have read and understand the Admission Policy of Storyland School

Parent's Name (print) _____

Signature _____ Date _____

-OFFICE USE ONLY-

Facility Representative Signature _____

Registration Fee Paid _____ Date \$_____ Cash_____ Check # _____

START DATE _____