

**Welcome, and thank you for selecting Montessori Children’s House of Lenawee!**

To ensure your child’s placement at Montessori Children’s House of Lenawee, return this form and a $75.00 enrollment fee to MCHL at 1008 W. Maple Ave. Adrian, MI 49221.

Tuition will be billed on a bi-monthly bases. Tuition payments are made through the FACTS online tuition system. Information regarding the FACTS program will be provided to parents and is also available on our school website: [www.mch-lenawee.org](http://www.mch-lenawee.org)

**Enrollment Checklist**

**\_\_Enrollment Form (required)** Complete the attached enrollment form and sign the financial commitment section. A copy will be made available to you.

**\_\_Copy of Official Birth Certificate (required for new enrollment)**

**\_\_Emergency Card (required)**

**\_\_Health Appraisal/Physical (with vision/hearing screening for school-aged students)** signed by a licensed medical doctor and performed within 12 months (for toddlers: 6 months) prior to the first day of school (required by Michigan law for each child new or returning) Physical evaluations must be updated as follows: a.) Yearly for toddlers b.) Every 2 years for preschoolers

**\_\_ Enrollment Deposit (required for new enrollment)** the enrollment deposit of $75.00 checks can be made payable to: Montessori Children’s House of Lenawee.

**\_\_Re-Enrollment Fee (required per child**) a $50.00 annual re-enrollment deposit is due with completed enrollment form. If enrolled by June 1, 2015, the fee will be applied to first month’s tuition.

**\_\_Enrollment in FACTS tuition program (required)** each family will be required to sign up online prior to the start of school.

\_\_**Signed Parent Handbook (required)** administrative staff will provide you with a copy.

**\_\_Signed Volunteer Hours (required)** if you choose to not volunteer or do not complete your hours, a total of $225.00 will be due and a check should be made payable to: Montessori Children’s House of Lenawee.

All new students will have a scheduled school visit prior to the start of the school year. While requests for specific teachers will be given consideration, classes are determined by student/teacher ratio.

**School Policies**

**Montessori Children’s House of Lenawee** is a nut free facility.

**Newly enrolled families** must pay a one-time, non-refundable enrollment fee of $25.00 and a $50.00 tuition deposit at the time of submitting enrollment form. This $50.00 deposit will be credited to your first payment. One check of $75.00 can be made payable to MCHL.

**Returning families** must pay an annual re-enrollment deposit per child. The 2015-16 deposit is $50.00. The re-enrollment deposit will be applied to the first tuition payment.

**Sibling discount:** 10% will be applied to the lowest tuition rate.

**Refer a family discount:** Each returning family that refers a newly enrolled family will receive a $50.00 credit to their overall tuition.

**Tuition paid in full incentive:** If yearly tuition is paid in full in the months of August or September, your family will receive all 10 child care days free!

**Students** that enroll after the September 8th start date will be charged a prorated tuition.

**Once your first tuition payment** has been submitted, you are financially responsible for the entire academic year.

*MCHL does not reimburse for vacation days, illness of child, Acts of God requiring school closure, exclusion due to non-vaccination, or voluntary withdrawal of enrollment.*

**A student** may not attend class if the financial account is more than 21 days past due.

**If a family has a chronic delinquency** (defined to be the occurrence of late payments more than 21 days past due in the previous 12 months), the Board of Directors, in its sole discretion, may decline to enroll a student, or require payment in full prior to the start of school.

**All students:** No medication can be given to any child without a signed medication form. This form is available in the main office. All medication must be in its original container.

Montessori Children’s House of Lenawee Mission Statement

We are a peace-oriented Montessori community dedicated to providing an encompassing education which nurtures the mind, body and spirit of every child.

**Student Information**

**STUDENT INFORMATION**

Name: First

Middle Last

Student Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary family email address\*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\*Important communication from MCHL is done largely via email. Please provide a current email address and make sure to update us if this email address ever changes. Thank you!*

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sex: M / F Ethnicity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Montessori Children’s House of Lenawee does not discriminate on the basis of race, color, religion, nationality or ethnic origin in the administration of its educational policies, scholarship and discount programs, or any other school administered programs.*

Program:

*Note to enrolling family: 3 day options are limited in each classroom*

 Toddler:

 \_\_\_ 3 Full Days 8:15 a.m. – 3:15 p.m. \_\_\_ 3 Half Days 8:15 – 11:15 a.m.

 \_\_\_ 5 Full Days 8:15 a.m. – 3:15 p.m. \_\_\_ 5 Half Days 8:15- 11: 15 a.m.

Preprimary:

\_\_\_ 3 F u l l Days 8:15 a.m. – 3:15 p.m. \_\_\_ 3 Half Days 8:15 a.m. – 11:15 a.m.

\_\_\_ 5 Full Days 8:15 a.m. – 3:15 p.m. \_\_\_ 5 Half Days 8:15 a.m. – 11:15 a.m.

**Parent Information**

Please advise the school of any custodial issues. If divorce/separation/joint custody allows duplicate mailing information to be given to other parent, please include name, address, phone number & email. *MCHL will require a copy of any Court Decree involving custody arrangements.*

|  |  |  |  |
| --- | --- | --- | --- |
| *Please print* | Father | Mother | Guardian/other Financially Responsible  |
| Full Name (First, Last) |  |  |  |
| AddressCityStateZip Code |  |  |  |
| Home phone |  |  |  |
| Cell phone |  |  |  |
| Work phone |  |  |  |
| Email address |  |  |  |
| Place of Employment |  |  |  |
| Occupation / Title |  |  |  |
| Marital Status |  |  |  |

How did you hear about MCHL? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Referral:

If you were referred to our school by an enrolled friend please list their name below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Photo/Recording Permission**

MCHL will be taking photographs and video/audio recordings of students and their work. These photos and recordings will be used for class newsletters/bulletin boards, public communications (advertisements, brochures, etc.) and the school website. Students may be photographed/ recorded in groups or individually or in groups.

*The school is very aware of the need to protect our children on the internet. It is our school policy to not identify children by first and last name on the internet; we will only post a child’s first name and his/her picture. Occasionally, we* *send special recognition photos and press releases to the local newspapers and we will identify students by first and last name and classroom for publication there.*

**YES** - I , parent/guardian of ,

 *(parent/guardian name) (student name)*

do give MCHL permission to use my child’s name, photograph, student work and/or videotaped image in publications, video productions, and/or school Internet website. I do further certify that I am of full legal capacity to execute the foregoing authorization and release.

**NO** - I , parent/guardian of ,

 *(parent/guardian name) (student name)*

do not give MCHL permission to use my child’s name, photograph, student work and/or videotaped image in publications, video productions, and/or school Internet website. I do further certify that I am of full legal capacity to execute the foregoing authorization and release.

Signature of parent/guardian Date

**2015-2016 School Year Tuition**

*The tuition amount is a set fee. As a courtesy, tuition is allowed to be paid monthly through the FACTS Tuition Management System.*

CIRCLE YOUR PROGRAM CHOICE

|  |
| --- |
| **TODDLER (AGES 13 MONTHS- 3 YEARS) September 8 - June 10** |
| **PROGRAM DAYS** | **TUITION** | **WEEKLY RATE** | **BI-MONTHLY PAYMENT** |
| **FULL DAYS 8:15 a.m.- 3:15 p.m.** |  |  |  |
| 5 Full (M-F) | **$6,319.30** | **$157.98** | **$315.95** |
| 3 Full Consecutive (Limited spaces) | **$4,739.48** | **$118.48** | **$236.98** |
|   |  |  |  |
| **HALF DAYS 8:15 a.m. - 11:15 a.m.** |  |  |  |
| 5 Half (M-F) | **$4,511.40** | **$112.79** | **$225.57** |
| 3 Half Consecutive (Limited spaces) | **$3,383.55** | **$84.59** | **$169.18** |
|   |  |  |  |
| **PREPRIMARY/KINDERGARTEN (3 YEARS- 6 YEARS) September 8 - June 10** |
| **PROGRAM DAYS** | **TUITION** | **WEEKLY RATE** | **BI-MONTHLY PAYMENT** |
| **FULL DAYS 8:15 a.m.- 3:15 p.m.** |  |  |  |
| 5 Full (M-F) | **$5,800.00** | **$145.00** | **$290.00** |
| 3 Full Consecutive (Limited spaces) | **$4,350.00** | **$108.75** | **$217.50** |
|   |  |  |  |
| **HALF DAYS 8:15 a.m. - 11:15 a.m.** |  |  |  |
| 5 Half (M-F) | **$3,872.00** | **$96.80** | **$193.60** |
| 3 Half Consecutive (Limited spaces) | **$2,904.00** | **$72.60** | **$145.20** |
|   |   |   |  |
| ***Program Add-on's:*** |   |   |  |
| **Child Care (8 days) 7 a.m. - 6 p.m.** | **INDICATE PREFERRED OPTIONS WITH AN “X”** |
| December 28, 29, 30, 2015 |   |   | **$120.00** |
| Conference Days- Nov. 6 & March 11 |  |  | **$80.00** |
| Spring Break- March 28-April 1, 2016 |  |  | **$200.00** |
| Prearranged (48 hours in advance)  | Limited Space |  | **$7.00 p/hour** |
| **Child Care Package of all 10 days** | No refunds if days are un-used |  | **$300.00** |
|  |  |  |  |
|  |  |  |  |
| Parent Signature & Date | Administration Signature & Date |

*MCHL does not reimburse for vacation days, illness of child, Acts of God requiring school closure, exclusion due to non-vaccination, or voluntary withdrawal of enrollment.*

I agree to pay Montessori Children’s House of Lenawee the tuition amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ which reflects my choice of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the 2015-2016 school year.

**All families are required to make bi-monthly payments through the online FACTS Tuition Management System unless making a one-time full year payment. There will be no exceptions.**

**Montessori Summer Camp 2016**

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| **Toddler (AGES 13 MONTHS- 3 YEARS) June 15 - August 24** |
| **PROGRAM DAYS** | **WEEKLY RATE** | **10 WEEKS (Add to yearly tuition, pay over 12 months instead of 10)** |
| **FULL DAYS 8 a.m. – 4 p.m.** |  |  |
| **5 Full (M-F)** | **$125.00** | **$1250.00** |
| **3 Full** | **$90.00** | **$900.00** |
| **2 Full** | **$70.00** | **$700.00** |
| **1 Full** | **$40.00** | **$400.00** |
|   |  |   |
|  Before & After Camp Care  |  | $40.00 per week for unlimited use |
|  Open: 7-8 a.m. & 4-5:30 p.m. |  |   |
|  |
| **Preprimary/School Aged (AGES 3- 9 YEARS) June 15 - August 24** |
| **PROGRAM DAYS** | **WEEKLY RATE** | **10 WEEKS (Add to yearly tuition, pay over 12 months instead of 10)** |
| **FULL DAYS 8 a.m. - 4 p.m.** |  |  |
| **5 Full (M-F)** | **$125.00** |  **$1250.00** |
| **3 Full** | **$90.00** |  **$900.00** |
| **2 Full** | **$70.00** | **$700.00** |
| **1 Full** | **$40.00** | **$400.00** |
|   |  |   |
|   |  |   |
|   |  |  |
| Total to be added to FACTS  | $ | To be completed by Administration |
|  | + $30.00 Enrollment fee  |
|  |  |
|  |   |
| Parent Signature | Administration Signature |
|  |  |
|  |  |
| Date |

Enrollment fee per child: $30.00 (this includes t-shirt, water bottle, and two snacks daily)

**Before School Care, Delayed pick-up, After School Care**

**BSC** is available on school days from 7:00 a.m. – 8:00 a.m.

**ASC** is available on school days from 3:15 p.m. – 6:15 p.m.

Late charge: If you are late picking up your child from ASC, there will be a charge of $10.00 every 15 minutes after 6:15 p.m.

MCHL charges $5.00 per hour and $2.50 per half-hour in the extended day programs. If your child is here for 10 minutes or more they are charged the half-hour rate, at 31 minutes of use they are charged the hourly rate. There are no exceptions to this policy. Arrangements must be made 24 hours in advance.

**Family Volunteer Requirement**

Parents are valued as active partners in their child’s education. Your gifts of time, talent, and treasure are crucial to the overall success and long-term viability of our school. Families will choose from a variety of volunteer opportunities. Our committed parents will help make learning at MCHL an exceptional experience. Thank you for your commitment to our school’s success.

I agree to volunteer a minimum of 15 hours during the school year OR I have included my tax-deductible check for $225.00 (made out to MCHL). Please check one:

 I will volunteer 15 hours

 \_\_I cannot volunteer, attached is my check for $225.00

*If you elected to volunteer and do not complete your volunteer fulfillment of 15 hours, $225.00 will be charged to your final FACTS payment.*

**Accepted and Agreed (Financially responsible party/parties must sign):**

Father/Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Printed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother/Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Printed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_