

A.L.P.S.

1621 Francisco Road Columbus, OH 43220
Phone (614) 451-5212

2017-2018 Registration Form (September - May)

Child's Name _____ Birth Date _____

Father/Guardian Name _____ Phone _____

Mother/Guardian Name _____ Phone _____

Address _____ City _____ Zip _____

E-mail Address (es) _____

Child's Name to be used/written in class _____

SELECT DAYS AND TIMES FOR YOUR CHILD (Students will be assigned to classes based on their age/birth date):

Choice	Class/Program	Days	Time	Fees	Tuition
	Half-Day Preschool	TTH	9-11:30	Registration - \$60 Supply - \$25*	\$1170/school year \$135/month
	Half-Day Preschool	MWF	9-11:30	Registration - \$60 Supply - \$30*	\$1710/school year \$195/month
	Half-Day Preschool	M-F	9-11:30	Registration - \$60 Supply - \$40*	\$2475/school year \$280/month
	Half-Day Preschool + Lunch Bunch	M-F	9-12:30	Registration - \$60 Supply - \$50*	\$3150/school year \$350/month
	Full-Day Preschool	TTH	9-3:00	Registration - \$60 Supply - \$30*	\$2340/school year \$260/month
	Full-Day Preschool	MWF	9-3:00	Registration - \$60 Supply - \$40*	\$3420/school year \$380/month
	Full-Day Preschool	M-F	9-3:00	Registration - \$60 Supply - \$50*	\$4725/school year \$525/month
	Extended Care	Regularly Scheduled Hours	Available 8-9 am 3-5 pm	No extra fees	\$6/hour (NO partial hour increments; all hours must be pre- arranged)

*There will be an additional \$10 deposit for a security system key fob that allows parents to enter the building. You will be **REQUIRED** to pay this deposit at Open House or sometime during the week prior to the start of preschool. Your deposit will be returned to you upon the return of the security fob.

Registration requires this completed form (back side also) with the registration fee of \$60 and the first month tuition. Registration fee is non-refundable.

2017-2018 Parent/School Contract

I understand that the tuition and fees for my child are as follows:

My child _____ is enrolled for part-day/full-day preschool classes

on the following days: M T W TH F

The total tuition for my child per month is _____ dollars with a non-refundable registration fee of \$60 and first month of tuition due with this contract to hold my child's place in this program.

Our one-time supply fee covers school supplies, art materials, paper goods for snack, Kleenex, etc.

____ I agree to pay my tuition and extended care fees **on or before the 1st of the month/week** and I understand that I will be charged a **\$5 late fee** for each day late after the due date.

____ I understand that there is no reduction of tuition for absence due to vacation or illness. For extended trips abroad (one month or more), parents must pay half of the tuition for the month(s) of travel to hold their child's space in our program. Alternately, I can dis-enroll my child and re-enroll at the end of my time abroad on a space availability basis. I understand that in this situation, I relinquish my child's spot and I do have to pay a second registration fee to re-enroll if/when space is available.

____ I understand that before and after care are offered for parents who have regular need for care during these hours. These hours need to be scheduled on a regular basis prior to the start of the school year.

____ I agree that a two-week written notice of withdrawal be made in advance; otherwise, I am liable for a two-week tuition payment.

____ I understand that my child must be at least three years old and potty trained to enroll in this program.

____ I understand that the school reserves the right, in extreme circumstances, to terminate the enrollment of any child if, in the opinion of the teacher, director, and preschool board, continued attendance would not be in the best interest of either the child or the school.

Signature of Parent/Guardian _____ Date _____

Signature of Preschool Director _____ Date _____

For our record keeping, how did you find out about ALPS? (circle one)

School Flyer

Advertisement

Internet

Friend Recommendation

If a friend recommended you, can you please tell us who? _____