

Russell Montessori Educational Services

2023-2024 Enrollment Form

CHILD INFORMATION

First/Last Name _____

Gender _____ Start Date _____ Birthday _____

Age at Time of Enrollment _____

Previous Child Care or
Preschool _____

Reason for Changing Schools

PARENT/GUARDIAN INFORMATION (Please Print)

First/Last Name

Home Address

Zip Code _____

Email _____

Employer _____

Work Phone _____

Work Address _____

Zip Code _____

Cell Phone _____

PARENT/GUARDIAN INFORMATION (Please Print)

First/Last Name

Home Address

Zip Code _____

Email _____

Employer _____

Work Phone _____

Work Address _____

Zip Code _____

Cell Phone _____

PICK-UP AUTHORIZATION (Name needs to match ID at pick up time)

Name _____ Relation _____ Phone _____
Name _____ Relation _____ Phone _____
Name _____ Relation _____ Phone _____
Name _____ Relation _____ Phone _____
Name _____ Relation _____ Phone _____
Name _____ Relation _____ Phone _____

In the event of a natural disaster such as an earthquake, the bridges and roads may be impassable for quite some time. We ask that each family designate a contact on the east side of the river who could come get your child.

Name _____ Relation _____
Phone _____

Out-of-State Contact Information

Name _____ Relation _____
Phone _____
Name _____ Relation _____
Phone _____

PARENT/GUARDIAN CONSENT

Checking the box gives consent for the following:

- In an emergency, the school has my permission to obtain medical care for my child.
- My child may be photographed during school hours to be shared on RMES social media/website.
- My child may be photographed during school hours to be shared on our Monthly Newsletter.(Just for families enrolled in the program)
- My child may be taken for neighborhood walking excursions under required supervision.

Required Signature(s)

Signature _____ Date _____

Signature _____ Date _____

Emergency Authorization Form

I, _____, legal parent of _____, authorize Russell Montessori Educational Services and staff to summon an ambulance at my expense to transport my child to the nearest Hospital. Russell Montessori Educational Services has my permission to seek medical attention in case I cannot be reached. I understand every attempt will be made to reach me.

Effective as of _____ (Date).

EMERGENCY CONTACT INFORMATION

Parent or Guardian

Home Phone/Cell Phone _____

Work Phone _____

Address _____

Parent or Guardian

Home Phone/Cell Phone _____

Work Phone _____

Address _____

Pediatrician _____

Phone _____

Health Insurance # _____

Group _____

In a non-emergency situation, Russell Montessori Educational Services staff shall administer appropriate first-aid and call a parent. At that time, the parent will determine whether they would like to pick up their child and see a physician or not. Russell Montessori ES staff will log the injury and make the child feel as comfortable as possible until they feel like joining the group or the parent picks them up. Under no circumstances will a staff member transport a child to the doctor or hospital for medical treatment.

Signature _____

Date _____

Signature _____

Date _____

MEDICAL INFORMATION

Immunization records or a medical exemption must be provided at the time of enrollment.

ALLERGY ALERT

Does your child have allergies? Yes _____ No _____

If yes, please list.

If yes, please list allergy reaction:

Has your child had the chicken

pox? _____

Does your child have special medical or educational needs? If yes, please list and also provide any health partners or providers you would like us to know about.

Doctor/ Specialist _____

Phone _____

Other _____

Phone _____

General Information

Are there family cultural backgrounds, traditions, beliefs, or interests that you would like to share with us?

Eating Habits _____

Special Diet Vegan Vegetarian No Dairy No Gluten Other special diet needs (if any): _____

OTHER CHILDREN IN THE HOME

Name _____ Age _____ Gender _____

Name _____ Age _____ Gender _____

Name _____ Age _____ Gender _____

Parent Initials _____, _____

Tuition

Infant /Toddlers (15 months-3 years)	Primary (3 years- 5 years) with bathroom Independency
<input type="checkbox"/> 4 days 8 to 4 \$ 1100	<input type="checkbox"/> 4 days 8 to 4 \$ 970
<input type="checkbox"/> 5 days 8 to 4 \$ 1170	<input type="checkbox"/> 5 days 8 to 4 \$ 1045
<input type="checkbox"/> 4 days 8 to 5 \$ 1185	<input type="checkbox"/> 4 days 8 to 5:00 \$ 1045
<input type="checkbox"/> 5 days 8 to 5 \$ 1260	<input type="checkbox"/> 5 days 8 to 5:00 \$ 1105
M-Th_____ T-F_____	M-Th_____ T-F_____

Before Care (7:30-8:00) \$ 60 a month per child.

Explanation of Fees for adding care to your current schedule:

Add Before Care 7:30-8:00am \$10.00 per day per child.	Late Pick-Up: \$1.00 per minute late
Add after care (4:00pm to 5:00pm): \$20.00 per day per child.	Recurrent late pick up: \$5.00 per minute late.
Add an extra day (4:00 pm pick-up): \$70.00 per day per child.	Add an extra day (5:00 pm pick-up): \$80.00 per day per child.

Russell Montessori Educational Services is a private Certified Family In Home Care offering part day and full day schedules 5 Days a week Monday - Friday.

We offer early care (7:30-8:00) for an extra charge

Breakfast, Lunch, mornings and afternoon snacks and enrichment class (Art, Spanish class, Yoga, etc) activities are included in monthly tuition.

Families may choose to pay yearly (due at the time of enrollment) or monthly (due on the **7th** of the month) **After day 7th a \$25 late fee will be charged for each day late.** Families with two or more attending children in our school will receive a 1% discount on total tuition, this discount just applies for your contracted schedule and does not apply for added care.

Russell Montessori Educational Services reserve the right to change Tuition and other fees with previous notification to all the families.

Signature _____

Date _____

Signature _____

Date _____

NEW STUDENT ENROLLMENT FEE \$100. This fee includes emergency kit fee, enrollment fee, material fee. The first month's tuition is due at the time of enrollment, along with the \$100 enrollment fee.

The first month's tuition, enrollment fee, and deposit are all non-refundable.

RE-ENROLLMENT FEE of \$100 applies each June when re-enrollment forms are due, and it covers Enrollment and the Material fee applied each September for the new school year. Tuition is not pro-rated. There are no refunds due to illness, child's absence, planned school closures, vacations, school closures due to inclement weather, power outage or holidays. Monthly tuition is set up for your convenience and does not reflect a true monthly rate, therefore no reductions or credit are given. It is the responsibility of the parent to find child care when school is closed. You are still responsible for the full tuition regardless.

We request 30 days notice for schedule changes.

If you need to withdraw from Russell Montessori ES, you must give written notice at least 30 days before your child's last day and before the 1st of the month.

Parents Initials _____ / _____

Late pick up agreement

Russell Montessori ES is open from 8:00 am to 5:00 pm Monday through Friday with before care available 7:30-8:00 am. We happily give a 10-minute grace period and first-time warning. If you are more than 5 minutes late after the first-time warning. We charge \$1.00 for every minute you are late to pick-up. Late fees invoices will be emailed to you through Kidkare and added to the next month tuition. This rule applies to all schedules. Continual late pick up will result in increasing the charge from \$1.00 to \$5.00 for every minute late. Parents will have the option to change kids pick up times to the next schedule available.

Parent Name _____

Signature _____ Date _____

Parent Name _____

Signature _____ Date _____