

## **REGISTRATION FORM 2023-2024**

Student IIII	ormation: birtii	date (MM/D	D/ Y Y J				F M
Legal Name: (Last)			(First)			(Middle)	
Address:		City:		AZ Zip Code:			
Phone:		E-mai	l Address*:				
Parent/Gue	ardian Informat	ion		*ISP will use t	his email address t	to send out mon	thly newsletters*
Relation	•		First Name	Address		Alt. Phone	
How did yo	ou hear about In	ternational :	School for Peac	e?			
Can you provide us with contact information for someone who may be interested in hearing about our school?							
Step 1: Choose Program							
☐ Partial Spanish Immersion				☐ Full Spanish Immersion			
			Step	2: Choose Hour	`S		
Precare	<u>7:30am-9am</u>	Full Day	<u>9am-2:30pm</u>	Half Day	<u>9am-12pm</u>	Aftercare	2:30pm-6:00pm
□ M-F	\$130/month	□ M-F	\$630/month	☐ M-F	\$550/month	□ M-F	\$235/month
☐ 4 Days*	\$120/month	☐ 4 Days*	\$600/month	☐ 4 Days*	\$515/month	☐ 4 Days*	\$210/month
$\square$ MWF	\$110/month	$\square$ MWF	\$565/month	$\square$ MWF	\$465/month	$\square$ MWF	\$185/month
□ T Th	\$90/month	☐ T Th	\$500/month	☐ T Th	\$410/month	☐ T Th	\$155/month
*Circle a 4 D	Oay Option: M - 1	TH or T - F	*	☐ M-F 7:30an	n-6:00pm \$995	/month	
ACKNOWLI	EDGEMENTS:						
□ _I CONSENT _□ _I DO NOT CONSENT to my child being videotaped or photographed. I understand that these tapes/photos may be displayed at school and/or used to promote the school vision in the community or through the media for professional/educational purposes. I understand I can change my consent at any time in writing to the preschool office.							
Families are responsible for contacting the preschool office no later than July 18th to change their August schedule; schedule changes must be made in writing. In the event of nonpayment, families will be responsible for all fees incurred by the preschool during the collection process in addition to the tuition. Enrollment is based on birth dates, classroom balancing, and capacities. International School for Peace reserves the right to change class offerings depending on enrollment. Families will be notified in advance.							
Parent/Guardian Signature Date							
		n fee per child	d, per school yea	ar: Continuing	online □  Child \$120 □Pai  received by:	d <b>New</b>	Date Child \$145 □ Paid