



Jr. Kindergarten Registration 2021-2022

<u>Daily Schedule</u>	<u>Program Title</u>
8am-9am:	AM Extended Care
9am-11:30am:	Half-Day Jr. Kindergarten
9am-2pm	Full-Day Jr. Kindergarten
2:00pm-4pm	PM Extended Care 2:30pm-4pm
<u>Daily Schedule</u>	<u>Program Title</u>

Child's Name:	_____		Nick Name:	_____		Birthday:	_____
Address:	_____						
Mother's Name:	_____	Home Phone:	_____				
Mother's Email:	_____	Mother's Cell:	_____				
Father's Name:	_____	Phone:	_____				
Father's Email:	_____	Father's Cell:	_____				
Gender:	_____						

Please list your child's dominant hand: _____

Jr. Kindergarten: Classes are offered Monday through Friday. Students staying for lunch will bring a cold lunch from home. Students must be 4 by September 1.

Please select preferences.

Calendar Preference: Please select preferences.

- Full-Year Continuous Enrollment (12 months):** LGCS follows the public school calendar. Children enrolled Full-Year will be eligible for Clubhouse Camps at no extra charge. Please note that Clubhouse needs a minimum number of enrollments to run. LGCS is closed on the following days: Memorial Day, 4th of July, Labor Day, Thanksgiving Week: Wednesday-Friday, Christmas Eve through New Year's Day.
- School-Year Enrollment (September - May):** LGCS follows the public school calendar. Clubhouse Camps are available for an additional fee on most District 96 Holidays including Spring Break. LGCS is closed on the following days: Memorial Day, 4th of July, Labor Day, Thanksgiving Week: Wednesday-Friday, Christmas Eve through New Year's Day.
 - Note: School-Year students will have the option to add Summer Camp Enrollment Space Permitting

Length of Day Preference: Please select preferences.

- Extended Day (Available 5 days per week) Until 6pm** Drop-Off: 8:45am-9:00am Pick Up: 2:30pm-6:00pm
- Extended Day (Available 5 days per week) Until 4pm** Drop-Off: 8:45am-9:00am Pick Up: 2:30pm-4:00pm
- Full-Day Preschool (Available 5 days per week):** Drop-Off: 8:45am-9:00am Pick Up: 2:00pm-2:15pm
- Half-Day Morning:** Drop-Off: 8:45am-9:00am Pick Up: 11:30am-11:45am

<u>Please Check One</u>	<u>Days per Week</u>	<u>Preferred Day(s) of the Week</u>	<u>Extended Monthly Payment</u>	<u>Extended Monthly Payment</u>	<u>Full-Day Monthly Payment</u>	<u>Half-Day AM Monthly Tuition</u>
<input type="checkbox"/>	5 Days	<input checked="" type="checkbox"/> Monday <input checked="" type="checkbox"/> Tuesday <input checked="" type="checkbox"/> Wednesday <input checked="" type="checkbox"/> Thursday <input checked="" type="checkbox"/> Friday	\$1166*	\$1083*	\$888	\$555
<input type="checkbox"/>	4 Days	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$1068	\$950	\$794	\$444
<input type="checkbox"/>	3 Days	<input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday y	\$851	\$728	\$611	\$333

*8am Drop-Off is complementary for 5 Days Per Week Extended Care Families.

Office

Fax

Web



A La Carte Program Options:

***Please note that per request of our families many of our programs are available a la carte. The following includes options for additional programs. The day is broken into a series of consecutive programs. Please do not hesitate to contact us with any questions on pricing for multiple programs.

Monthly Pricing is listed below. Families may pay annually, by semester or monthly.

AM Extended Care: Students may be dropped off before school starts between 8am-8:45am. There is a discounted rate for families who commit to the whole year. Extended Care may be added as needed.

<u>Please Check One</u>	<u>Days per Week</u>	<u>Preferred Day(s) of the Week</u>	<u>Monthly Tuition</u>
<input type="checkbox"/>	5 Days	<input checked="" type="checkbox"/> Monday <input checked="" type="checkbox"/> Tuesday <input checked="" type="checkbox"/> Wednesday <input checked="" type="checkbox"/> Thursday <input checked="" type="checkbox"/> Friday	\$195
<input type="checkbox"/>	4 Days	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$156
<input type="checkbox"/>	3 Days	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$117
<input type="checkbox"/>	2 Days	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$80
<input type="checkbox"/>	1 Day	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$40

PM Extended Care until 4pm: Students may stay late for after care.

<u>Please Check One</u>	<u>Days per Week</u>	<u>Preferred Day(s) of the Week</u>	<u>Monthly Commitment Tuition</u>
<input type="checkbox"/>	5 Days	<input checked="" type="checkbox"/> Monday <input checked="" type="checkbox"/> Tuesday <input checked="" type="checkbox"/> Wednesday <input checked="" type="checkbox"/> Thursday <input checked="" type="checkbox"/> Friday	\$195
<input type="checkbox"/>	4 Days	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$156
<input type="checkbox"/>	3 Days	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$117
<input type="checkbox"/>	2 Days	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$80
<input type="checkbox"/>	1 Day	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$40

PM Extended Care until 5pm: Students may stay late for after care.

***Note: There must be minimum of 5 students daily for Extended Care to be offered until 6pm.

<u>Please Check One</u>	<u>Days per Week</u>	<u>Preferred Day(s) of the Week</u>	<u>Monthly Commitment Tuition</u>
<input type="checkbox"/>	5 Days	<input checked="" type="checkbox"/> Monday <input checked="" type="checkbox"/> Tuesday <input checked="" type="checkbox"/> Wednesday <input checked="" type="checkbox"/> Thursday <input checked="" type="checkbox"/> Friday	\$360
<input type="checkbox"/>	4 Days	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$320
<input type="checkbox"/>	3 Days	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$240
<input type="checkbox"/>	2 Days	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$160
<input type="checkbox"/>	1 Day	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	\$80

Please note that there is a discount for LGCS families attending Full-Day 5 Days per week or Full-Day + Extended Care 5 days per week. Please select Extended Care or Full-Day. Please do not hesitate to ask if there are any questions.



Student Pick-Up

Long Grove Country School will be running programs and classes continually throughout the day. We ask that you are respectful of pick-up times for your child. Students will only be released to individuals with a photo ID. Please send your child to school with a written note if your child will be picked up by someone other than yourself.

Please list any individuals authorized to pick up your child from school.

1. _____	Relationship to Child _____	Phone _____
2. _____	Relationship to Child _____	Phone _____
3. _____	Relationship to Child _____	Phone _____

Tuition Policy: Tuition is assessed annually. It is only tied to a specific month for payment purposes.

Tuition may be paid annually, by semester, or monthly.

Please let us know your preferred payment option: Monthly Semesterly Annually

<p><u>Tuition Discount Options</u></p> <ul style="list-style-type: none"> • A 10% discount is given for each sibling. • There is a 10% discount for any tuition paid by June 30th. This includes monthly, semesterly, or annual tuition payments. Any discounted payments and prepayments are <u>non-refundable</u>. ELearning will be available if schools close for any reason. Credits will be issued for Extended Care payments if schools are required by order of the Governor. • There is a 5% discount for any tuition paid in full by August 15th. Any discounted payments and prepayments are non-refundable. 	<p><u>General Policies</u></p> <ul style="list-style-type: none"> • Insufficient Funds Fee: There will be a \$25 service fee for all checks returned for insufficient funds. • There is <u>no refund</u> for Tuition Payments for any reason including vacation, sick days, pandemic/national disasters or moving. • Regular tuition is due for weeks with holidays. • Tuition may be prorated to the end of the current semester of attendance if a family moves or if a child withdraws from enrollment.
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Payments Plans:

- Annual Payment Plans:** Payment is due by August 15.
- Monthly Payment Plans:** The monthly payment plan is due on the 15th day of the month prior month. For example, September Tuition is due on August 15th.
- Semester Payment Plans:** The first payment is due on or before August 15. The second payment is due by January 15.

Release and Waiver of Claims

In consideration of my child's enrollment in Long Grove Country School and/or Long Grove Country School Summer Camp, we agree to release and hold harmless and indemnify Long Grove Country School and/or Long Grove Country Camp, its agents and employees, from and against all damages, liabilities, losses and expenses (including attorney's fees) arising out of or resulting from any claims, causes of action or demands whatsoever, made by us or by any other person or entity on the behalf of the child's participation in Long Grove Country School and/or Camp to the extent permitted by law, except for acts of omissions involving willful or wanton conduct by a director, officer, employee or agent of Long Grove Country School and/or Camp, and we hereby waive any and all such claims, demands and causes of action.

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many



locations, prohibited the congregation of groups of people.

Long Grove Country School (LGCS) has put in place preventative measures to reduce the spread of COVID-19; however, the LGCS cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending the LGCS or any summer program could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending LGCS and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Club may result from the actions, omissions, or negligence of myself and others, including, but not limited to, LGCS employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with mychild(ren)'s attendance at the LGCS or participation in LGCS programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the Long Grove Country School, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Long Grove Country School, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any LGCS program.

Parent Handbook: A detailed description of policies and procedures are listed in the Parent Handbook. Each child must have a guardian sign the parent handbook acknowledgement page confirming that they have read and agree to Long Grove Country School's policies and procedures. This includes policies and procedures for safety regarding Covid-19.

Photograph Release

We permit Long Grove Country School and/or Camp to use photographs, films, videotapes and other facsimiles of the child taken during and/or camp (and related activities) in its brochures, newspapers, slide presentations and any other publications concerning promoting Long Grove Country School and/or Camp.

Classes/Group Assignment

Long Grove Country School reserves the right to assign students to a specific classroom if this is in the best interest of the child or consolidate classes if attendance is low due to illness, enrollment or other factors to encourage socialization and/or individual development.

Vaccines & Immunization

Long Grove Country School requires all students to provide the state required immunizations for their child. This form should be available at your Pediatrician's office and must be submitted before your child may start school or summer camp.

Birth Certificate: State licensing requires a certified copy of the enrolled child's birth certificate to be copied by the school before attending school.

\$100 (per family) non-refundable registration fee is due upon registration.

Name of Child(ren): _____

Parent or Guardian's Name: _____



Parent or Guardian's Signature and Date: _____

Health Information & Emergency Treatment and Release

As a parent and/or guardian, I authorize the treatment by a qualified and licensed medical doctor of the following minor in the event of a medical emergency which in the opinion of the attending physician, may endanger his/her life, cause disfigurement, physical impairment or undue discomfort if delayed. This authority is granted after reasonable effort has been made to reach me and is in effect for the duration of the minor's care by Long Grove Country School.

Name of child/minor: _____	Birthdate: _____
Name of child/minor: _____	Birthdate: _____

Address _____	City _____	State _____	Zip _____
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Mom's Home Phone _____	Cell _____	Work _____
Dad's Home Phone _____	Cell _____	Work _____

Specific allergies, chronic illnesses, other medical or education concerns:

In the case of an emergency or illness, Long Grove Country School will contact the child's parents. If unable to contact the parents, the following people should be contacted:

- | | | |
|----------|-----------------------------|-------------|
| 1. _____ | Relationship to Child _____ | Phone _____ |
| 2. _____ | Relationship to Child _____ | Phone _____ |
| 3. _____ | Relationship to Child _____ | Phone _____ |

Long Grove Country School has the permission from the parents to release the above minor(s) at any time to the people listed above without prior notice from the parent in the event of an emergency or illness.

This form is signed with the sole purpose of authorizing medical treatment under emergency circumstances in my absence. I assume all responsibilities for any fees incurred, and agree to prompt reimbursement of expenses paid.

Physician's Name _____

Physican's Address & Phone _____

Policy Holder's Name _____

Insurance Provider _____

Policy Number _____

Parent Signature

Date

Parents Signature

Date



Student Information

Child's Name: _____ **Nick Name:** _____ **Birthday:** _____
Mother's Name: _____ **Phone:** _____
Father's Name: _____ **Phone:** _____

Who does your child live with?: Both Mom Dad

Please list any brothers and sisters of your child:

Name _____	Age _____	Grade _____
Name _____	Age _____	Grade _____
Name _____	Age _____	Grade _____
Name _____	Age _____	Grade _____

What are your goals for your child in preschool?

Please let us know some areas of special interest to your child.

(Animal, Dinosaurs, Princesses, Trains, Sports, Dolls, etc.)

What does your child like doing when he/she is not at school?

What are your child's strengths?

Please list any preschools or classes your child has experienced and his/her reaction to these situations.
