



## Application for Enrollment

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Male/Female

Father, Stepfather, or Male Guardian (circle):

Mother, Stepmother, or Female Guardian (circle):

\_\_\_\_\_  
Name (Last, First)

\_\_\_\_\_  
Name (Last, First)

\_\_\_\_\_  
Number/Street

\_\_\_\_\_  
Number/Street

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Employer (or note None)

\_\_\_\_\_  
Employer (or note None)

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Other Phone

\_\_\_\_\_  
Other Phone

\_\_\_\_\_  
e-mail

\_\_\_\_\_  
e-mail

Financial responsibility will be assumed by \_\_\_\_\_ Email for Billing \_\_\_\_\_

ALLERGIES OR FOOD RESTRICTIONS \_\_\_\_\_ Epipen: Yes/No Exp. Date \_\_\_\_\_

Any other medical condition or issue we should know about \_\_\_\_\_

\_\_\_\_\_  
Physician's Name: \_\_\_\_\_ Physician's Phone Number: \_\_\_\_\_

Health Insurance Carrier \_\_\_\_\_ Insurance Policy/Group Number: \_\_\_\_\_

In what school district do you reside? \_\_\_\_\_

Novi Woods Montessori occasionally takes photos of children in the classroom. Novi Woods Montessori never posts these photos on their website, social media accounts or advertising material without written consent from parents. Photos are included, however, in the weekly newsletter that is only sent to current families. Parents agree to allow their child to be included in these newsletter photos. If a parent wishes to opt out of these newsletter photos, they must sign a form that can be obtained in the office. Children with this form will not have their photo taken at all and photos will not be available for parents.

Parents agree to provide all food and drinks (unless purchasing hot lunch). Parents agree to provide naptime supplies, extra clothes and socks, diapers, wipes and any other supplies their child may need while in care. Novi Woods Montessori will not be responsible for damaged or missing personal possessions.

Parent Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Application continues on other side



# Novi Woods Montessori

## Enrollment Contract

Child's Name \_\_\_\_\_ (Male \_\_\_\_\_ Female \_\_\_\_\_) Birthdate \_\_\_\_\_

**Program (circle one):** \_\_\_ Preschool/Kindergarten \_\_\_ Toddler

**Schedule (circle one):** \_\_\_ Full Day (7am-6pm) \_\_\_ Academic Day (Kinder/Preschool Only) (8:30am-3:30pm) \_\_\_ Half Day

**Number of days per week** \_\_\_\_\_ Options: 5 days only for Toddler. 3, 4 or 5 days for Preschool/Kindergarten

**I agree to enroll my child at Novi Woods Montessori Center, Inc and to pay the tuition rate in my Tuition Schedule Worksheet.** The rate on the Tuition Schedule Worksheet will be billed on my child's first day of enrollment and then on the 1st of the month, with a partial payment due on June 1. My agreement to pay tuition and other fees for the full period of enrollment(s) and is not subject to adjustment for any reason, including but not limited to illnesses, legal holidays, in-service days, personal vacations, school calendar vacations, or school closing emergencies including lack of utilities such as power and water, severe weather or any other reason. Tuition and other fees not paid may result in cancellation of my child's program. To finalize enrollment, I understand that a \$100 Registration Fee is due.

### **I also agree to the following:**

**Early Withdrawal Policy:** Early withdrawal during the academic year constitutes a breach of this Tuition and Enrollment Contract. A two-week written notice of withdrawal must be given. Tuition is still owed for those two weeks and will be pro-rated based on your tuition rate. In addition, a penalty of \$350.00 will be charged. This applies to all students.

**Extended Absence:** Tuition is not subject to adjustment because of illness, vacation/travel or extended absence, unless over two weeks. If the absence is over two weeks, the first two weeks' tuition is still due. Beginning on the third week and each week following, you will be charged half the tuition for that period. This guarantees the child's place upon return. A weekly tuition rate will be calculated based on your tuition rate to determine fees owed.

**Late Pickup Charges:** There is an hourly rate of \$12/hour if your child stays beyond their scheduled time (prior to closing time). This should be scheduled ahead of time for staffing purposes. **Additionally, a \$ 1.00 per minute fee will be assessed when a child is picked up after 6:00pm, payable directly to the teacher caring for your child. Please notify the school immediately if you know you will be arriving after 6:00pm.** Regular late arrivals can result in cancellation of your child's enrollment from the program.

**Past Due Charges and Fees:** A late fee of \$35.00 will be added to your account for past due payments. Payments more than 5 days late can result in cancellation of your child's enrollment from the program. There will be a \$ 35.00 fee for any checks that are returned to us as NSF from your bank. Any change in your child's schedule must be requested in written form and will incur a \$35.00 administrative charge. This fee will be waived if the change is an increase in hours and tuition. If Novi Woods Montessori is forced to take action to collect any amount of unpaid tuition, then, the parent will be responsible and hereby agrees to reimburse Novi Woods Montessori for any and all attorney's fees, filing fees, and/or costs associated with efforts made by Novi Woods Montessori to collect.

**Discounts:** A 10% discount is given for a second child and all subsequent children enrolled in one family during the academic year. Discounts are given on the less expensive programs. A 2% discount is given if the entire Academic Year's tuition is paid prior to the start of the school year.

**MEDICAL RELEASE:** I hereby declare that I am the parent or legal guardian of the above-named child I give permission to Novi Woods Montessori (Oakland Montessori Academy), licensed by the Department of Human Services to secure emergency medical and/or emergency surgical treatment for the above-named child while in care. I hereby release and discharge Novi Woods Montessori, its agents, employees, and officers, from all claims, demands, actions or judgments which the undersigned ever had, now has or may have against the school, its successors or assigned, for all personal injuries or illness, which the child named above may suffer or incur as a result of the actions of Novi Woods Montessori or in procuring medical treatment. I certify that the child named above is in good health and free from any communicable disease or illness.

**Illness:** To protect all children, your child will not be accepted at the center if he/she has any of the following symptoms: a fever, a rash or eye infection that has not been diagnosed, or any diarrhea or vomiting. Children must be fever-free and vomit-free for 24 hours before returning to school. If your child develops any of the above symptoms while in the center, he/she will be isolated from the other children, parents will be contacted by phone, and the child must be picked up within one hour of that phone call.

**Supplies:** I agree to provide all food and drinks (unless purchasing hot lunch). I agree to provide naptime supplies, extra clothes and socks, diapers, wipes and any other supplies their child may need while in care. Novi Woods Montessori will not be responsible for damaged or missing personal possessions.

**Parent Handbook:** I have received a copy of the Novi Woods Montessori Parent Handbook (Rev. 2/19). I have read and agree to comply with the policies contained in the Handbook which govern the terms of the Tuition and Enrollment Contract and have been given an opportunity to ask questions about the content of the Handbook. I understand that the Handbook together with the Tuition and Enrollment Contract reflects the current policies and procedures of Novi Woods Montessori and that it replaces and supersedes any prior policies, procedures or Handbooks. I agree to conform to these policies and procedures and understand that these policies and benefits may be amended, modified, terminated or replaced by Novi Woods Montessori. I understand that this Handbook is the property of Novi Woods Montessori upon termination of childcare services or graduation.

PARENT NOTIFICATION OF THE LICENSING NOTEBOOK Child Care Organizations Act, 1973 Public Act 116 Michigan Department of Licensing and Regulatory Affairs All child care centers must maintain a licensing notebook which includes all licensing inspection reports, special investigation reports and all related corrective action plans (CAP). The notebook must include all reports issued and CAPs developed on and after May 27, 2010 until the license is closed. This center maintains a licensing notebook of all licensing inspection reports, special investigation reports and all related corrective action plans. The notebook will be available to parents for review during regular business hours. Licensing inspection and special investigation reports from at least the past two years are available on the Bureau of Community and Health Systems website at [www.michigan.gov/michildcare](http://www.michigan.gov/michildcare).

Parent Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_