



UPHOLDING STRONG VALUES FOR YOUR CHILD'S CARE AND EDUCATION

Parent Agreement Enrollment Form

Children's Names: 1 _____ Birthdate: _____

2 _____ Birthdate: _____

3 _____ Birthdate: _____

Parents' Names: _____

Address: _____

Home Phone: _____

Mother's Work Information _____
Name of Company _____ Work Phone _____

Father's Work Information _____
Name of Company _____ Work Phone _____

Enrollment Fee: I understand that the fee for enrolling each of my children is payable at the time of submitting this agreement form and that the fee is nonrefundable.

Payment Policy:

- 1) I understand tuition is due on or before Monday of the week for which payment is being made, and I agree to make payments regularly as tuition is due.
- 2) I understand a \$15.00 late fee must be added to tuition payment if payment is made after 6:00 p.m. Tuesday.
- 3) I understand there is a \$15.00 charge for returned checks. I agree to pay this charge upon notification that a check has been returned.
- 4) I understand The Sloan School closes sharply at 6:00 p.m. I agree to pay \$5.00 + \$1.00 per minute after 6:10 p.m. for late care if my child is left after 6:00 p.m. for any reason.
- 5) I understand that all amounts are due and payable in Dallas County, Texas together with all costs of collection.

Absent Policy:

- 1) I understand as long as my child is an enrolled student, tuition is due weekly. I understand that when The Sloan School is closed for a holiday, full tuition is to be paid.
- 2) I understand that if my child is enrolled year round, my child is eligible for 2 vacation weeks per year. My child will not attend school Monday-Friday of these 2 weeks. These weeks can be taken separately, but I understand there will be no split weeks or vacation days. I understand that if my child is not here for the summer, he/she is not eligible for vacation. I understand that private school students' vacation weeks must be taken during the summer. I understand vacation time must be used by December 31; it is not accruable. If my child is enrolled in May-December, I have 1 vacation week for that year.

Other Records:

- 1) I understand my child must have a medical form or statement signed by a physician that he/she is free from communicable and infectious disease and immunizations required by the state are current.
- 2) I have signed the medical consent form and I understand that I will be responsible for all emergency care fees. THE SLOAN SCHOOL is not responsible for normal childhood accidents. All medical bills are to be sent directly to the parent or guardian at the address stated above.
- 3) I understand my child must have the following forms on file on their first day of attendance: this enrollment form, general information form, discipline and guidance form, admission form, health form signed by your child's physician.

Student Policy:

- 1) New students will be accepted on a temporary basis pending acceptable adjustment to our school environment.
- 2) If it is agreed upon by the staff that a child needs special professional or medical help for a problem affecting his behavior at school, this help must be secured by the parents or the child is to be removed from the school.
- 3) Students should not bring personal belongings to the school except for clothing, naptime items (small blanket and cribsheet) and show and tell items. The school will not be responsible for items lost or broken. Clothes and toys should be clearly marked with a name.
- 4) Only parents or persons authorized by parents may pick up a child. Children must be left in the presence of a staff member.
- 5) Sick children cannot be kept at school. If your child has a temperature over 100° or has indications of an infection such as vomiting or diarrhea, we will notify you. Parents must pick up sick children immediately upon notification.

Mother's Signature / Date

Father's Signature / Date

Enrollment Fee \$ _____ Book Fee \$ _____ Weekly Rate \$ _____