



Enrollment Packet Due Date: _____

MORELAND CHILD DEVELOPMENT CENTER JUNIOR KINDERGARTEN REGISTRATION

3750 Gleason Avenue, San Jose, CA 95130 • Phone: (408) 874-3745
 Fax: (408) 374-8367 • Website: www.morelandpreschool.moreland.org

Date: _____ New Enrollment School Year: 20__ - 20__ Continuing Enrollment School Year: 20__ - 20__

To reserve a place for your child, complete the registration form and return it with your \$100 non-refundable annual registration fee to: Moreland Child Development Center Registration, Moreland School District, 4711 Campbell Avenue, San Jose, CA 95130.

CONTACT INFORMATION

Child's Last Name _____ Child's First Name _____ Gender _____ Date of Birth mm/dd/yy _____

Mother's/Guardian's Information

Father's/Guardian's Information

Last Name _____ First Name _____

Last Name _____ First Name _____

Address _____

Address _____

City/State/Zip _____

City/State/Zip _____

Home Phone _____ Work Phone _____

Home Phone _____ Work Phone _____

Cell Phone _____ Email _____

Cell Phone _____ Email _____

PROGRAM OPTIONS AND ANNUAL FEES

JUNIOR KINDERGARTEN PROGRAM 8:30 A.M.—1:30 P.M.

- _____ 5 Days \$9,000/year (\$900/monthly installment)
- _____ 3 Days (MWF) \$5,940/year (\$594/monthly installment)
- _____ 2 Days (TuTh) \$3,960/year (\$396/monthly installment)

How did you hear about us?

- _____ Banner/Flyer
- _____ Google Search/Website
- _____ Facebook
- _____ Elementary School Open Houses
- _____ Referral: _____
- _____ Other: _____

A 15% sibling discount will be applied to the 2nd child (or the lesser fee) of the family as long as both siblings are enrolled in the Moreland Child Development Center. **Sibling's Name:** _____

PAYMENT OPTIONS

1. Annual tuition paid in full minus a 5% discount. Tuition is due on July 1st. Initial here: _____
2. Annual tuition paid in installments. First installment is due on July 1st and subsequent installments are due on the 1st beginning in September until May 1st. Initial here: _____

PAYMENT AGREEMENT

I agree to the \$100 non-refundable registration fee payable to Moreland Preschool to secure my spot & pay the programs fees with the payment method I have initialed above.

Parent's/Guardian's Signature _____ Date _____

Parent's/Guardian's Signature _____ Date _____

FOR OFFICE USE ONLY

Check # _____ Amount: \$ _____ Date Received: _____ Comments: _____



MORELAND CHILD DEVELOPMENT CENTER ADMISSION AGREEMENT

3750 Gleason Avenue, San Jose, CA 95130 • Phone: (408) 874-3745
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Child's First Name _____ Child's Last Name _____ School Year _____
 My child will attend the Moreland Child Development Center located at 3750 Gleason Avenue, San Jose, CA 95130.

1. I agree to pay the annual tuition as stated on my child's registration form in full or in installments. The annual tuition payment will be due on July 1st. For installments, the first payment will be due on July 1st and will continue on the 1st of each month beginning September 1st until May 1st. If the 1st is a non-business day, such as a holiday or weekend, payment is due the business day preceding the 1st. Payments can be made at the preschool, online, or the district office. A \$50 late fee will be charged if payment is not received by the 3rd business day after the due date and if payment is not received 4 business days after the due date, an involuntary withdrawal will take place. A \$20 fee will be charged for a returned check.
2. I understand that the annual tuition and days of operation are based on the Moreland School District board approved student calendar. School breaks have been taken into consideration in calculating the annual fee.
3. Moreland Child Development Center (CDC) will provide a 30-day written notice of any changes to their program policies, tuition and/or payment options.
4. I understand that Moreland CDC follows Title 22 regulations enforced by the California Department of Social Services, Community Care division.
5. I understand that I must complete and submit all enrollment paperwork within the given due date or I will forfeit my child's space in the program. Moreland Preschool will send reminder emails and/or phone calls to notify me that my paperwork is due. This will include a final notice email or phone call.
6. I agree to notify the site director in writing if there is a change in schedule. I will fill out a Change of Schedule form at least two weeks before the change is to occur. I understand that my annual tuition will be recalculated and my remaining installment payments will be adjusted to reflect my requested change in schedule. A \$5 fee will be charged for each schedule change.
7. I understand that withdrawals from the program will not be permitted December 1st-31st and that schedule changes or withdrawal from the program will not be permitted after March 1st.
8. I understand that my child will not be able to sign up for the subsequent year if I have an outstanding balance due.
9. I understand that if I choose to withdraw my child from Moreland CDC, my annual tuition will be recalculated into a weekly rate and I will be financially responsible for all the weeks he/she has attended. My final payment will be due one week before the agreed withdrawal date. In the event of a refund, if the refund check is over \$100, I will be required to sign for and pick up the check in person at the District Office. If I choose to return to Moreland CDC, I will pay a \$50 re-registration fee.
10. Moreland CDC has an open door policy and encourages parents to visit at any time.
11. My child will be picked up at dismissal time each day. I understand that there is a 5 minute grace period past dismissal time after which I will be charged a late fee of \$1.00 per minute if my child is picked up late. Termination from the program may occur due to frequent late pick ups.
12. I understand that the day before Winter Break and the Last Day of School will be shortened days. For preschool, AM dismissal time will be 10:15 AM and the PM class will be 10:30 AM-12:30 PM. For Junior Kindergarten, dismissal time will be 12:30 PM.
13. I understand that it is my responsibility to change information on my child's emergency card. If someone arrives to pick up my child and he/she is not listed on the card, my child will not be released. Changes must be in writing and verbal permission will not be granted. One parent may not remove the other parent from the Identification and Emergency Information form without legal paperwork allowing us to do so.
14. I agree to escort my child to his/her assigned classroom at Moreland CDC and sign my child in and out daily with my full signature and exact time.
15. I must notify the site staff by calling them if my child is absent for the day. Refunds and make-up days will not be given for absent children. I will notify the site director if my child contracts a communicable disease. If my child gets sick during their stay at Moreland CDC, I understand that it is my responsibility to pick him/her up within thirty (30) minutes after receiving the call from the site staff.
16. I understand that it is my responsibility, upon registration, to notify the center staff of any and all medical conditions that affect my child. My child's physician and I will fill out the medication release form should my child need medication while at Moreland CDC. I will provide the medication in its original box with the doctor's orders to the site.
17. Moreland CDC staff is required by law to report suspected child abuse.
18. I expect to be treated respectfully and in return, I will treat all site staff and other students with respect.
19. Information regarding my child will be kept strictly confidential. I may discuss my child's progress with the site director at any time.
20. If my child's behavior threatens other children or staff, I will be notified via telephone or in writing. If my child is asked to leave for the day, I will pick him/her within thirty (30) minutes. Moreland CDC reserves the right to terminate services at any time.
21. I understand that Moreland CDC follows the Moreland School District Wellness policy. I understand that a snack will be served daily and it is my responsibility to notify staff of any food allergies, sensitivities, and/or preferences. I will provide my child with an alternative snack if he/she cannot have the snack provided.
22. If tuition payment is split among multiple parties, all parties must sign the Admission Policy/Tuition Agreement below. If the account becomes delinquent, an involuntary withdrawal will take place.
23. I will receive a receipt for all payments made towards my annual tuition. I am responsible for keeping my receipts for tax purposes. I agree to pay \$5 for any additional receipts or \$25 for a yearly receipt summary. I understand that my request may take up to two weeks to process.
24. I agree that Moreland CDC operates with a highly trained and professional staff. Their teacher to student ratio follows Title 22 regulations of 1:12 for a fully qualified teacher and 1:6 for a teacher's aide.
25. A 20% discount will be applied to the tuition of the children of current Moreland School District employee unit members.
26. All students must be potty-trained. The Moreland CDC staff is not licensed to change diapers. Moreland CDC reserves the right to terminate services at any time.
27. All Preschool students must turn three years old by February 1st of the school year. Children can not enroll in the school until thirty (30) days before the age of three.
28. All Junior Kindergarten students must turn four years old by December 2nd of the school year.

I have read all policies on the Moreland Child Development Center Admission Policy/Tuition Agreement. I agree to them and understand that failure to follow any site policies can lead to termination of program services.

Parent/Guardian Signature _____ Date _____ Site Director Signature _____ Date _____

ADDITIONAL AGREEMENTS (OPTIONAL):

I agree to allow photographs of my child to be used by Moreland Child Development Center for legitimate purposes in newspaper articles, promotional materials (such as brochures), the district/school website, the school Facebook page, or bulletin boards .

Initial here: _____

I also agree to allow my child to use the Internet on computers located at the Moreland Child Development Center. I understand that staff members will monitor my child closely when using the computer.

Initial here: _____