



# Admission Packet

## 2020-2021

To apply:

- Complete the attached Admission Application.
- A non-refundable \$75 enrollment fee. This enrollment fee guarantees your child's spot for the upcoming school year.
- A current copy of your child's immunization record.
- A copy of your child's birth certificate.

**Please return all above documents to the Redeemer Nixa Preschool office. These items must be turned in to secure your child's spot for the 2020-2021 school year.**

If you have any questions, please call 417.725.4288 ext.412



# Admission Application

2020-2021 School year

Child's Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Age \_\_\_\_\_ Male/Female \_\_\_\_\_ Preferred Name \_\_\_\_\_

## Parent/Guardian Information

**Mother's or Guardian Name** \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address: \_\_\_\_\_ City/State \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Mother's Employer \_\_\_\_\_

Work #: \_\_\_\_\_ Work Address: \_\_\_\_\_

**Father's or Guardian Name** \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address: \_\_\_\_\_ City/State \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Father's Employer \_\_\_\_\_

Work #: \_\_\_\_\_ Work Address: \_\_\_\_\_

Parents Live Together YES NO

If NO, who has legal custody? Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

## Additional Emergency Contacts:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

## Authorized Individuals to Pick-Up other than Parents or Emergency Contacts:

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

## Individuals who may NOT Pick-Up my child:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

## Medical Information:

Does your child have allergies? \_\_\_\_\_

Hearing, vision, or speech difficulties \_\_\_\_\_

Other medical information \_\_\_\_\_

## Getting to Know Your Child:

Has your child had previous daycare or preschool experience? \_\_\_\_\_

If so, where and what dates? \_\_\_\_\_

Why did you decide to leave a previous program? \_\_\_\_\_

Has your child ever been asked to leave a preschool or daycare before? \_\_\_\_\_

If yes, please put down a day you and your child would be able to come in to meet with the teachers to further discuss \_\_\_\_\_

How did you hear about our preschool program? \_\_\_\_\_

Sibling's names and ages \_\_\_\_\_

Does your child attend Sunday School and/or church? \_\_\_\_\_

Where? \_\_\_\_\_

## Pricing and Scheduling for 2020-2021

Monthly Rates	2 Days	3 Days	4 Days	5 Days
Mornings 8:15-12:30	\$170/mo.	\$225/mo.	\$280/ mo.	\$335/mo.

\*August Tuition will be prorated and will be half of your normal monthly cost

## Class Schedule Choice: Please indicate your schedule choice

Class	Schedule	Mornings 8:15am- 12:30pm	Days to attend
Pre-Kindergarten	<input type="checkbox"/> 3 Days	<input type="checkbox"/>	
	<input type="checkbox"/> 4 Days	<input type="checkbox"/>	
	<input type="checkbox"/> 5 Days	<input type="checkbox"/>	Mon-Fri
3 Year Olds	<input type="checkbox"/> 2 Days	<input type="checkbox"/>	
	<input type="checkbox"/> 3 Days	<input type="checkbox"/>	
	<input type="checkbox"/> 4 Days	<input type="checkbox"/>	
	<input type="checkbox"/> 5 Days	<input type="checkbox"/>	Mon-Fri

## Redeemer Nixa Preschool Agreement

Please initial the statements below

1. \_\_\_\_\_ I understand that my child must be toilet trained prior to starting preschool.
2. \_\_\_\_\_ When my child is ill, I understand that my child will not be accepted into school. Illness is indicated by a fever of 100 or greater in the past 24 hours, diarrhea, or vomiting. If my child gets sick at school, I will make arrangements for them to be picked up immediately.
3. \_\_\_\_\_ I agree to communicate with the school if my child is sick or on vacation.
4. \_\_\_\_\_ I understand that tuition is due at the beginning of each month. A late-fee of \$25 will be applied to tuition received after the 15<sup>th</sup>.
5. \_\_\_\_\_ I understand that if tuition is not up to date by the 10<sup>th</sup> of the following month, without arrangements being made, the student will be unable to attend classes until the account is current.
6. \_\_\_\_\_ I agree to pay a school supply fee of \$75 by the first day of the school year
7. \_\_\_\_\_ I understand that regular and punctual attendance are an important part of my child's education. I will have my child on time to start class and picked up on time each day. Class begins as 8:15, half day ends at 12:30 and full day ends at 3:00; with the option of extended care.
8. \_\_\_\_\_ I understand that if my child is picked up late after 5:30pm I will be charged a late fee of \$25.
9. \_\_\_\_\_ I understand that I need to give a 30 day notice if I withdraw my child from the program.
10. \_\_\_\_\_ I understand that if RNP closes due to inclement weather conditions, that it will be communicated via local news media, mass parent email, and Facebook. I also understand that no tuition credit will be given in the case of school cancellation.
11. \_\_\_\_\_ I understand that the \$75 enrollment fee is non-refundable.
12. \_\_\_\_\_ I give permission for my child to be photographed and the photos to be used for school brochures, website or other presentations that show the activities children do at school. I understand that my child's personal information such as his/her name, would **NOT** be attached to any photograph used. Yes \_\_\_\_\_ No \_\_\_\_\_

### Statement of Agreement and Support

As a parent (or legal guardian), I agree to support and cooperate with Redeemer Nixa Preschool and abide by its policies, rules and regulations, striving to be a supportive part of the Christian community of students, teachers, and family as we work together in God's name. **I agree to pay tuition and fees according to the plan indicated in agreement with school policy.**

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_