

Registration Form (2024-2025)

Sammamish Chinese School

**Bilingual Preschool Program** 

# Program Registration (Check Your Selection)

Full Day Schedule:

Days	Time	Tuition (Monthly)	
M-F (5 days)	Full Time ( <u>9:00 am-3:00 pm</u> )	\$1450	
M-F (5 days)	Full Time +Extended Care (8:00 am-6:00 pm)	\$1850	
M-F (5 days)	AM Part Time ( <u>9:00 am-12:00 pm</u> )	\$750	
M-F (5 days)	PM Part Time ( <u>12:00 pm-3:00 pm</u> )	\$750	

Certain Day Options: Once the certain days are selected, student will keep this schedule throughout the school year.

Days	Time	Tuition (Monthly)			
	Full Time ( <u>9:00 am-3:00 pm</u> )	\$980	☐ M ☐ TH	□ T □ F	□ W
3 days	Full Time +Extended Care ( <u>8:00 am-6:00 pm</u> )	\$1250	☐ M ☐ TH	□ T □ F	W
	Full Time ( <u>9:00 am-3:00 pm</u> )	\$690	☐ M ☐ TH	□ T □ F	W
2 days	Full Time +Extended Care (8:00 am-6:00 pm)	\$880	☐ M ☐ TH	□ T □ F	W

## Non-Refundable Registration and Material Fee: \$250

### **Discount/Benefit**

- School extends a 10% discount for each additional child after the first student from the same family (sibling must be enrolled at the same time).
  - The discount will be based on the lowest tuition (equal or lesser value).
  - This discount is for tuition only.
- Separate charges will apply to all students attending break time childcare (Sammamish Chinese School no-school-camp program) during winter break in December and spring break in April.
- A 30% discount on break time childcare fee will be applied for children scheduled to attend M-F 9:00 am 3:00 pm or 8:00 am 6:00 pm.
- Last day of school is 6/18. Sammamish Chinese School offers all students summer camp program matching the same time period for free for the rest of June.

For community family's convenience, the school provides "**One day drop Childcare**", the tuition will be \$90/day for 9:00 am-3:00 pm; \$115/day for 8:00 am-6:00 pm. Please contact school office for more details about the service.

# **Contact Information**

Child's Name	Birth Date	Gender 🗌 Male 🗌 Female	
Child's Preferred Name if Differe	ent		
Address	City	Zip Code	
Primary Contact			
Parent Name (1)	Parent	Name (2)	
Employer	Employ	/er	
Work Phone	Work F	Phone	
Home Phone	Home I	Phone	
Cell Phone	Cell Ph	one	
Email	Email_		
Emergency Contact (Other than Contact Name	Relationship to	Child	
Address			
Home Phone Cell Phone			
Medical Information			
Physician's Name		Phone	
Date of Last Exam			
Dentist's Name		Phone	
Date of Last Dental Exam			
Preferred Hospital			

Allergies and Potential Reaction

Up-to-date on Age Appropriate Immunizations?	P □Yes □ No		
Medical and/or Social/Emotional/Behavioral Challenges if any:			
Background Information			
Is English Your Child's First Language?	]Yes 🗌 No		
Language Spoken at Home other than English _			
Last School Attended	How Long		
Child's Interest and Favorite Activities:			
Specific Fears, Likes, or Dislikes Your Child Ha	as that Might Help Us to Know Him/Her More:		

# Liability Release Form

The undersigned has enrolled	_to attend
Sammamish Chinese School-Bilingual Preschool Program activities and partic	cipate in the
programs offered. In consideration, the undersigned releases and discharges S	Sammamish
Chinese School-Bilingual Preschool Program, its officers and employees from	ı liability of any
kind to the child or the undersigned for any loss or injury to the child while pa	rticipating in
school or extended day program activities. The undersigned agrees that this re-	elease is intended

to be as broad as permitted under the law of the State of Washington and if any part of the application is found unenforceable the remainder may be enforced in full.

Parent Signature: D	Date:
---------------------	-------

## **Consent For Emergency Treatment/Field Trip Permission**

I hereby give permission for my child \_\_\_\_\_\_to:

- Be given emergency treatment by a qualified staff member at Sammamish Chinese School-Bilingual Preschool Program.
- Be transported by ambulance or aid car to an emergency center for treatment.
- Receive medical, surgical, and hospital care, treatment, and procedures by all licensed physicians or hospitals when deemed immediately necessary or advisable by the physician to safeguard my child's health.
- Participate in in-house field trips or go to off-site field trips scheduled and supervised by the Sammamish Chinese School-Bilingual Preschool Program.

Parent Signature:	D	Date:

### Media and Information Release

- I give permission for Sammamish Chinese School-Bilingual Preschool Program to use photos or videos of my child \_\_\_\_\_\_\_taken during class time or school events to be used within the school or in our newsletters and/or on our website and/or marketing.
- I give permission for student and parent names and email addresses to be distributed to the classroom parents. This is for internal distribution only.

## \*\*\*\*\*\*If you wish to opt out, please email the office.\*\*\*\*\*\*

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

#### Parent/School Contract 2024-2025 School Year

Please read the Parent/School Contract below and initial on the line next to each number. By initialing each section and signing this contract you are accepting the terms.

#### **School Policies, Tuition and Withdrawal Agreement:**

\_\_\_\_\_\_1. I agree to pay Sammamish Chinese School – Bilingual Preschool Program a nonrefundable registration/materials fee as well as a tuition deposit for June (last month's tuition) upon enrollment.

2. I agree to pay tuition on or before the 1st of every month. If the 1st falls on a weekend or holiday, then tuition is due before the 1st of the month. A late fee of \$10/day will be charged if payment is not received by the 5th of the month. A \$25.00 fee will be applied for any returned checks.

\_\_\_\_\_\_ 3. I will receive a 10% discount for each additional child after the first student from the same family (sibling must be enrolled at the same time). The discount will be based on the lowest tuition (of equal or lesser value). The discount is for tuition only.

4. I understand that tuition is based on the 10-month school year and due in full each month regardless of illness, weather/emergency closures or vacations.

\_\_\_\_\_ 5. I will be charged with extra fee of \$1/minute for late picking up after being warned 3 times.

6. I agree to submit a written withdrawal notice (email is sufficient) to the office 2 weeks prior to my child's last day if I choose to withdraw my child from school or make changes in my child's enrollment in the program. The tuition for the current month will not be refunded.

7. I understand that my child must be up to date on all age-appropriate "required vaccines for child care entry", unless it is due to a health condition signed by a health care provider for a medical exemption.

#### **Breaks:**

\_\_\_\_\_\_1. Separate charges will apply to all students attending break time childcare (Sammamish Chinese School no-school-camp program) during winter break in December and spring break in April.

2. A 30% discount on break time childcare fee will be applied for students scheduled to attend M-F 9:00 am - 3:00 pm or 8:00 am - 6:00 pm.

\_\_\_\_\_\_ 3. Childcare during any breaks is available only if we have a minimum of 5 kids registered.

Child's Full Name	 Parent/Guardian Full Name	

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