

# Welcome

Dear Parents.

It is with great pleasure that we welcome you to Riverchase Montessori.

Our school offers full time and part time programs from 6:30 am. to 6:30 pm. In addition to our Montessori Education we offer extra curricular activities that complement our program such as Yoga, Spanish, Music, P.E and Sports, Computer Lab for children 3 and older, Karate and outdoor activities.

As a procedure for enrollment, your child is welcome to visit our school for one half day (8:30am to 12 p.m.) at no cost to you in order for your child to be evaluated and to determine his/her class placement. This is also an opportunity for you to confirm if this is the school of your choice.

It is our mission to provide to each and every child the opportunity to excel and become above-average students applying the philosophy and method of Dr. Maria Montessori. It is in this way that Riverchase Montessori contributes to forming individuals confident in character, academically successful, and socially adjusted. At Riverchase, we instill a high regard for moral values, integrity and respect for others, providing positive contributors to our society and to the world.

Thank you very much for your interest in Riverchase Montessori and I look forward to welcoming you and your child and assisting you in the process of enrollment.

**School Director** 



## **Application for Registration**

Child's full name:	Date of Bi	rth	Boy	Girl
Address	City	State	Zip Code	
Name of Mother :Address	_Home Phone	Number		
Name of Father:Address				
E-mail Address available for the school to communicate to you	u at all times: P	Please print		
<ul> <li>Riverchase Montessori accepts students with the expectation of pror acceptance to determine whether his/her academic and emotional needs to be minimum expectations for admission and continuing attendance and the minimum expectations for admission and continuing attendance and the minimum expectations for admission and continuing attendance and the minimum expectations are suit the academic curriculum level and the continuing attendance and the minimum expectation and the continuing attendance and t</li></ul>	eds will be met. are: I of the class; lass; leasure of independent towards teacher aptive; ry Disorder basis of race, color to the basic admissionces are expected the teacher's attent the differences. Behavior	dence; as and other students if yes to either of assion procedures, the to meet the standard tion. Riverchase Mor aving with considera	these choices, eligion. e School accepts a ds of classroom bet ntessori believes th	few students navior, not be at all children
Please choose the program you are applying for:	Starting Date:			
Three Full Days 6:30 to 6:30 pm Three School Days 8:00 to 3:00 pm Three Half Days 8:00 to 12:30 pm Infant Program I (under 12 months) I have read and acknowledge the terms of this agreement.	Five School Five Full Da	Days 8:00 to 12:00 p I Days 8:00 to 3:00 ays 6:30 am to 6:30 After School Careno.	pm pm	chool Only
Signature of Parent or Guardian:			Date:	

1555 E. Sandy Lake

Coppell, Texas

Phone # 972-745-1500



## **Health Statement**

Child's full name:		Da	te of Birth
Address	City	State	Zip Code
Height	Weight		
Health History and Doctor's Examination:			
Special Needs YES	NC	)	
Does your child needs glasses? YES	NC	)	
Current Immunization Record Enclosed	Does this child have	allergies to any o	f the following?
Hearing and Vision Screening Enclosed	1) Food	2)	Medication
Results for HearingResults for Vision	3) Insect Bites	4)	) Other
Test Date	5) Is the child on any	y long term medica	ation?
Licensed Health Care Statement: I have examined is able to take part in the school program.	d this child in the	e past calenda	r year and find that he/she
			r year and find that he/she
is able to take part in the school program.			
is able to take part in the school program.  Physician's Signature	culties or learning c	Date:	No
Behavior and Conduct Statement  Is your child considered a special needs child? Yes Do you believe your child may have any attention difficult so, please explain:	culties or learning on the case and in the demic) Riverchase as 30 day notice is	differences? se explain: on of behavior event the school Montessori resiguen as well	No and the pressure of a class ool is unable to meet the deserves the right to terminate



## Parent Agreement 2021 - 2022

Sic	Signature of Parent or Guardian Date:	
_	I have read all terms and acknowledge this agreement.	
•	<ul> <li>I give permission for my address and phone number to be published in the school directory (if any). Yes No</li> <li>I give permission for my child to be photographed during school hours and functions. Also, for his/her artwork to be school website. Yes No</li> </ul>	
•	Riverchase Montessori reserves my child's placement in the school every day for the entire year. Therefore, I agree full amount each month, even though my child may not attend some days during the month due to sickness, vinclement weather. The only time in which tuition is prorated is the first month of initial enrollment or re-enroll withdrawal.  • TERMINATION OF REGISTRATION: Riverchase Montessori reserves the right to disenroll any child if payment of other costs is not made by the 15th of the applicable month. Furthermore, Riverchase reserves the right to disenroll sider necessary for the well-being of my child and /of other children in the class  • YEARLY RE-REGISTRATION: A Yearly Re-enrollment fee of \$50.00 per family is due each year in order to gua acceptance of my child in the following school year. This fee secures placement and confirms acceptance and refundable.	to pay the vacation or Iment after of tuition or when con- arantee the d it is non-
•	<ul> <li>WITHDRAWAL: The obligation for full payment of tuition continues until the day indicated by the parent or guardian as of withdrawal. The parent / guardian agrees to furnish Riverchase Montessori with at least 30 (thirty) days writte such a date of withdrawal. Failure to do so will result in forfeiture of the Security Deposit and tuition for the month of the Security Deposit will be refunded with a thirty day written notice of intended withdrawal. I understand that the which my child departs and gives notice of withdrawal is paid in full regardless if departure date is in the middle of the ABSENCES: Tuition must be paid in full without deduction for absences of any duration or for any cause, a substitution of other days of attendance as "make up" days. This is necessary due to staffing and operational cost incurred on the basis of fixed levels of enrollment. Furthermore, in the event my child takes more than one month of the Registration Fee changes into Initial Registration Fee of \$200. My child is considered a new student from this potential.</li> </ul>	n notice of withdrawal. e month in e month. nd without sts that are of absence, int on.
SE	SECURITY DEPOSIT: A \$300 Security Deposit and first month's tuition are due at the time of my child's enrollment.	7131.
	for the entire academic school year. Summer Program (June and July) is optional.  FOR STUDENTS ALREADY ENROLLED: Riverchase prorates tuition only in periods of 2 weeks to students returning t leaving at the end of the year. These two weeks periods are: From the 1st to the 15th and from the 15th to the 3	o school or



<b>Tuition Schedule</b>		2021- 2022	<b>School Year</b>
5 Full Day Program	6:30 a.m. to 6:30 p.m.		Monthly Tuition
Montessori Education Monday	through Friday 8:00 a.m. to 3:00 p.m		
Included in your tuition: Music,	Yoga, PE and Sports, Computer Lab, S	panish & outdoor activities.	5 Full Day = \$1055
Warm Lunch prepared at school	ol with three snacks during the day		
Option to enroll in the Extra Cu	rricular Activities at an extra cost: Balle	t, Piano, Sports and Karate.	3 Full Days = \$955
Days of Daycare Only are inclu	ded. Riverchase Montessori follows the	e C. I.S. D calendar.	
Summer Program is Optional	TUITION IS NOT PRORATED DURIN	G THE MONTHS OF AUGUST TO M	AY.
School Day Program	8:00 a.m. to 3:00 p.m.		Monthly Tuition
Montessori Education Monday	y through Friday 8:00 a.m. to 3:00 p.m.		
Included in your tuition: Music,	Yoga, PE and Sports, Computer Lab, S	spanish & outdoor activities.	5 School Days = \$945
Two snacks and a Warm Lunc	h during the day included in the tuition		
Extracurricular activities option	al at an extra cost: Ballet, Piano, Sport	Sports and Karate. 3 School Days = \$	
Days of Daycare Only are inclu	ded. Riverchase Montessori follows the	e C. I.S. D calendar.	
Summer Program is Optional	TUITION IS NOT PRORATED DURIN	IG THE MONTHS OF AUGUST TO M	AY.
Half Day Program	8:00 a.m. to 12:00 p.m.		Monthly Tuition
Montessori Education Monday	through Friday 8:00 a.m. to 12:00 p.m.		•
Included in your tuition: Music,	Yoga, PE and Sports, Computer Lab, S	panish & outdoor activities.	5 Half Days = \$825
Warm Lunch and one snack du	ring the day included in the tuition		
Extracurricular activities option	al at an extra cost: Ballet, Piano, Sport	s and Karate.	3 Half Days = \$775
Days of Daycare Only are inclu	ded. Riverchase Montessori follows the	e C. I.S. D calendar.	
Summer Program is Optional	TUITION IS NOT PRORATED DURIN	G THE MONTHS OF AUGUST TO M	AY.

INFANT PROGRAM I = \$1,275 PER MONTH	INFANT PROGRAM II = \$1,175 PER MONTH

AFTER SCHOOL: \$400 PER MONTH		SUMMER SCHOOL ENROLLMENT = \$ 50.00
	Other Fees	

1. Registration Fee	\$200 per family
2. Supply Fee (August 1st. and January 1st.)	\$150 per semester per child
3. Yearly Re-Registration Fee	\$ 50 per family per year
4. Summer Program Activity & Entertainment Fee	\$50 per month per child in June & July

5.	Security Deposit	\$ 300
6.	Late fee when tuition if not paid by the 5th of each month	\$ 35.00
	NSF fee will be added to your invoice when a return check takes place	

I acknowledge the terms of this fee schedule.



# **Emergency Authorization**

Child's Name	Date	e of Birth
Parent or Guardian Name		
Address	City	Zip
Mother's Cell:	Father's Cell:	
Work Phone: Mother	Father	
If a parent cannot be contacted in case of any the following persons in the order listed. transportation available during the child's scho and who can be called upon in an emergency	The individuals listed are repool hours. These individuals a	eliable persons who have time and are persons that this child knows well,
Name	Daytime Telephone	
Address	Driver's License	
Name	Daytime Telephone	
Address	Driver's License	
In the event that medical attention is require contacts can be reached, the following physic	· · · · · · · · · · · · · · · · · · ·	
Physician's Name	Phone	
Address		
In case of emergency, when neither a parent Riverchase Montessori has my permission to hospital personal have my permission to perfo	take my child by car or am	
Signature of Parent or Guardian		Date
Subscribed and sworn to before me, this	day of	,(year)
Notary P	ublic	County of Texas.
		Notary Seal



## **Release Authorization**

Please list the name, address, relationship, phone number and driver's license of individuals, **other than parents**, to whom Riverchase Montessori is authorized to release your child.

Name:	Phone Number:
Address:	
Relationship	Driver's License No
Name:	Phone Number:
Address:	
Relationship	Driver's License No
Name .	Dia ana a Manada an
Name:	
Address:	
Relationship	Driver's License No
D (1 0)	
Parent's Signature	Date

I understand that the person bringing or picking up my child is to be sure that a staff member is aware of the child's (children) arrival or departure. A copy of the Driver's License will remain in my child's file for each person listed above.

My child will not be released if all the information above does not match with the individual asking for him / her.



### Automated Payment processing Safe - Convenient - Easy

We are excited to offer the safety, convenience and ease of Tuition Express™ – an automatic payment processing system that allows on-time tuition and fee payments to be made from your bank account.

### AUTHORIZATION FOR BANK ACCOUNT ELECTRONIC FUNDS TRANSFER

I (we) hereby authorize Riverchase Montessori (business name) to initiate debit entries to my (our) Checking or Savings Account indicated below. To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice.

Credit Union Members: Please contact your Credit Union to verify account and routing numbers for automatic payments.

Your Name		Phone #		
Address		City	State	Zip
Bank or Credit Union Name				
Bank or Credit Union Address	5	City	State	Zip
			Che	cking Savings
Routing Transit Number (see	sample below)	Account Number (see sample below)		
A				
Signature		Date		
Signature  ☐ Check if you wish to make	online payments	Date		
☐ Check if you wish to make	John Sample Mary Sample 123 Nice Street	Date  BANK OF THE WEST SSS-SSS-SSSS	00226	A service o
☐ Check if you wish to make  For Official Use Only	John Sample Mary Sample 123 Nice Street Anytown, USA Pay to the	DAKK OF THE WEST	00226	A service o
☐ Check if you wish to make	John Sample Mary Sample 123 Nice Street Anytown, USA	BANK OF THE WEST 555-555-5555		A service o



## **Parent Checklist**

**UPDATED YEARS:** 2018-19 2019-20 2020-21 2021-22 2022-23 2023-24 2024-25

I have received and completed all agreements and release forms needed.

### Please check and initial:

APPLICATION FOR ADMISSION - SIGNED
RELEASE AUTHORIZATION - SIGNED
HEALTH STATEMENT - SIGNED BY PHYSICIAN
PARENT TUITION AGREEMENT - SIGNED
EMERGENCY MEDICAL AUTHORIZATION - NOTARIZED
CURRENT IMMUNIZATION RECORD - SIGNED BY PHYSICIAN
Acknowledgement receipt of Parent's Handbook & Discipline Policy
Acknowledgement of Tuition Express Authorization

AS SOON AS ALL THE PAPER WORK NEEDED FOR YOUR CHILD'S FILE IS SUBMITED AND COMPLETE, A SECURITY PIN FOR SIGNING IN AND OUT IS GIVEN TO EACH PARENT INDIVIDUALLY.

Please Sign Below:			
Signature of Parent or Guardian	-	Date	

I understand that my child is considered accepted at Riverchase Montessori until all forms are fully completed, included a current record of Immunizations signed by a physician and initial financial responsibilities are paid.