Open to Enrolled San Tan Families. Toddler through 6th Grade. Activities Tailored by Age.

SAN TAN MONTESSORI SUMMER CAMP





CHOOSE YOUR PROGRAM - 3, 4, OR 5 DAYS
PLAN YOUR DAY - HALF DAY OR FULL DAY
CHOOSE YOUR WEEKS





2020 SUMMER CAMP ENROLLMENT AGREEMENT

June 1st – July 29th, 2020 Toddler – 6th Grade

| Student First Name: | | Last Name: | _ |
|---------------------|------|--|---|
| DOB: | Age: | Incoming Grade for 2020-2021 School Year | _ |
| | | | |

Registration Fee: \$100.00 per student. Due at Registration. This registration fee is non-refundable and non-transferable. Withdrawal at any time, for any reason, after the submission of the enrollment forms results in the forfeit of the enrollment fee. This fee cannot be applied to the payment of any other fees.

Choose Your Own Adventure Summer Camp

Choose the days and weeks you need. Lunch is from 12 PM - 1 PM. If you would like your child in the AM program to experience lunch with the group, choose AML. If your child will be participating in an academic or athletic morning camp, details will be asked on page 3 to ensure a smooth transition into the PM program.

Tuition is billed the month prior. June tuition is billed May 1^{st} , July tuition is billed June 1^{st} . If enrolling on/after May 1^{st} , June tuition will be due at registration. If enrolling on/after June 1^{st} , full tuition will be due at registration.

| Summer Program | 5 Days per Week | 4 Days per Week | 3 Days per Week | | | | | |
|--|-----------------|-----------------|-----------------|--|--|--|--|--|
| Before Care Available from 7:00 am – 8:00 am Billed at the end of the month, based on usage. | | | | | | | | |
| AM – 8:00 AM – 12:00 PM | \$235 | \$200 | \$165 | | | | | |
| AML – 8:00 AM – 1:00 PM | \$260 | \$220 | \$180 | | | | | |
| PM – 12:00 PM – 3:45 PM | \$235 | \$200 | \$165 | | | | | |
| FULL – 8:00 AM – 3:45 PM | \$280 | \$250 | \$225 | | | | | |
| After Care Available from 3:45 pm – 5:45 pm Billed at the end of the month, based on usage. | | | | | | | | |

Please indicate weekly program participation below with an "x" or "√" □ Utilize the below schedule for ______ (#) siblings. If schedules differ, complete per student. Sibling Names: _____ □ Include Lunch (AML) with the AM Schedule Below □ Apply Siblings/Military Family Discount (10%)

| 5 Day F | ull Day | | If Full Day, choose both AM & PM for those days. | | | | | | | | | Planned Use | | AMT. DUE | | | | | |
|---------|-------------|---------|--|----|------|----|----|--------|----|----|-------|-------------|----|----------|----|----|----------------|---------------|-------------|
| Week# | Full Day | Mon. | AM | PM | Tue. | AM | PM | Wed. | AM | PM | Thur. | AM | PM | Fri. | AM | PM | Before Care | After Care | Weekly Rate |
| Week 1 | | June 1 | | | 2 | | | 3 | | | 4 | | | 5 | | | | | |
| Week 2 | | June 8 | | | 9 | | | 10 | | | 11 | | | 12 | | | | | |
| Week 3 | | June 15 | | | 16 | | | 17 | | | 18 | | | 19 | | | | | |
| Week 4 | | June 22 | | | 23 | | | 24 | | | 25 | | | 26 | | | | | |
| Week 5 | | June 29 | | | 30 | | | July 1 | | | 2 | | | 3 | | | | | |
| Week 6 | | July 6 | | | 7 | | | 8 | | | 9 | | | 10 | | | | | |
| Week 7 | | July 13 | | | 14 | | | 15 | | | 16 | | | 17 | | | | | |
| Week 8 | | July 20 | | | 21 | | | 22 | | | 23 | | | 24 | | | | | |
| Week 9 | | July 27 | | | 28 | | | 29 | | | | | | | | | | | |

<u>Tuition Policy:</u> San Tan Montessori has a 9-week summer program for Toddlers through in coming 6th graders. Tuition will be billed on May 1st and June 1st and is due by 11th of the month. *Tuition is not refunded or pro-rated due to absences caused by illness, vacations, withdrawal/dismissal, or otherwise.* Early withdrawal from the program does not terminate parent's tuition responsibility. Enrollment in the program entails responsibility for the entire summer's tuition.

Multiple Students: Tuition will be reduced at a rate of 10% off the entire tuition if multiple students are enrolled.

<u>Allergy & Nutrition Policy:</u> San Tan Montessori is a nut free and low sugar program. Students will not be provided sweets within the program and we ask that you do not send them in lunches. Students provide their own lunch and parents take turns bringing group snacks. A calendar will be provided.

Extended Care: Extended Care is billed separately, based on usage. Billing goes out by the 5th of the month, due by the 15th. Indicating your expected need within the schedule grid above allows us to plan for staffing and activities.

| Before Care | After Care | Extended Care | Full Day |
|-----------------------|-----------------------|------------------------|------------------------|
| 7:00 – 8:00 AM | 3:45 – 4:45 PM | 3:45 – 5:45 PM | 7:00 – 5:45 PM |
| \$60/week or \$12/day | \$60/week or \$12/day | \$120/week or \$24/day | \$180/week or \$36/day |

<u>Late Pick-Up Fee:</u> San Tan Montessori is open from 7:00 am – 5:45 pm. Beginning at 5:46 pm, **\$1.00** per minute is billed until your child is picked up.

<u>Disclosure:</u> Parent has disclosed any pertinent information in writing within the **general comments or special needs your child may have** section of the student application to San Tan Montessori. Pertinent information includes any physical, mental, or emotional disabilities of the child or any other matter which could affect the child's enrollment and/or participation at the school. Parent signifies by signing this agreement that the child is physically capable of participating in all aspects of the Montessori program that was chosen.

<u>Withdrawal:</u> This agreement may be terminated by parent <u>upon a 14 day written notice</u>; Parents will be responsible for payment of tuitions and fees for 30 days following the office receiving the written notice of withdrawal. Parent agrees that withdrawal or dismissal of their child(ren) after the execution of this agreement, whether as a result of accident, transfer, relocation due to parent's occupation, financial difficulty, sickness, disciplinary action, disagreement with teaching style, school policies, or otherwise, <u>does not</u> relieve the parent of the responsibility of fulfilling the school's tuition policy.

<u>Dismissal by San Tan Montessori School</u>: The school reserves the right to discharge, at any time, any child, who, in the opinion of the Administration and their teacher is not benefiting from the instruction <u>or</u> whose behavior is detrimental to the program at the school. The recommendation and observations of the student's teacher are taken into consideration and withdrawal is not undertaken unless the school can see that it is to the best advantage of the student, and/or the classroom.

Failure to Pay: The Parent agrees to pay the aforementioned tuition and fees as specified, time being of the essence with respect thereto. In the event of non-payment of any funds due hereunder, San Tan Montessori, reserves the right to cancel this agreement and to exclude the child from participation in the instruction. The unpaid balance shall accrue thirty days from and after the due date, until paid in full, at the interest rate of 24% per year. In the event that it becomes necessary for San Tan Montessori to employ a collection agency and/or attorney for collection of any amounts due under this agreement, parent agrees to pay all the costs and expenses incurred by San Tan Montessori, whether or not litigation is initiated, including, but not limited to all postage fees, attorney fees, and court costs incurred by San Tan Montessori. Delinquent accounts will be sent to a company or lawyer employed by the school for collections management. If payment is still delinquent at the end of the second month the student's attendance will be suspended on the 1st day of the next month. Placement is lost if balance is not brought to current statues by the 30th of that month.

Returned Checks: A charge of \$25.00 will be made on any returned check.

| Upon signing, I acknowledge that an authorized pe each use. Upon signing, I have read the Enrollment | erson, 18 years or older, is require | |
|---|--------------------------------------|--|
| Signature of Parent (Mother) or Guardian | Signature of Parent (Father) or | Guardian Date |
| For Office Use Only: Date & Initials of Received | JUNE \$ □ PAII | □ 10% SIBLING/MILITARY DISC D JULY \$ □ PAID |
| NOTES & PAID DATES DEALTH IN | · | D JOLY \$ □ PAID □ PAID □ STAFF ROSTER □ HEALTH ROSTER |



2020 SUMMER CAMP ENROLLMENT

STUDENT DETAILS

AUTHORIZED PEOPLE, HEALTH, AND CAMP TRANSITION

| First Name: | | Last Name: _ | | | | |
|---------------------|-----------------------------|--|-----------------|-----------------|------------------------|--|
| DOB: | Age: | or 2020-2021 S | School Year | | | |
| ☐ Siblings have SAN | ME authorized people | e. If No, complete this form | for each stude | ent. | | |
| | | | | | | |
| | | DOB: _ | | | | |
| _ | | | | Age/Grade: | | |
| Name of Sibling 3: | | DOB: _ | | Age/Grade: | | |
| The primary people | e picking up my child | (ren) are: | | | | |
| Full Name (Parent | :/Guardian) | Phone Number | | Email Addres | S | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| In case of an emer | gency, the following | people are authorized to p | ick up my chilo | d(ren) from Sui | mmer Camp and/or after | |
| care program: | , | | | | , | |
| Minimum of 2 | | | Phone Numb | er | Relationship | |
| 1. required | | | | | | |
| 2. required | | | | | | |
| 3. optional | | | | | | |
| 4. optional | | | | | | |
| | . , , | medical or allergy informat | • | | | |
| | | | | | | |
| NAME: | | NAME: | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Montessori camp f | or the afternoon sess | ur child is participating in a sion, please provide camp n nsible for signing your child | ame and dates | s so that we m | | |
| | | | | | | |