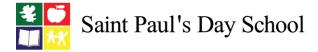


CHILD & FAMILY INFORMATION

Child's Name		Nickname to be used in school	
Sex: 🗌 M 🗌 F	Date of Birth	Home Phone	
Street Address		Town	Zip
Class Level	# days per we	eek AM 🗌 PM 🗌	Full Day
Mother's Name		Email	
Cell Phone	Employer	Work P	hone
Father's Name		Email	
Cell Phone	Employer	Work P	hone
Do both parents liv	re at same address? 🗌 Yes 🗌	No Languages spoken at home	
,	an parent(s) listed above autho t the Authorized Pick Up form o	prized to pick up your child? Yes No	
Names and ages of	other children in household:		
MEDICAL INFORM	ATION		
Doctor's Name		Address & Phone	
Preferred Hospital			
Dentist's Name		Address & Phone	
Allergies 🗌 Yes 🗌	No	Other health needs?	
		– please attach two current pictures of you with the Action Plan.	r child's face. All supplies such
EMERGENCY CONT	ACTS other than parents, who	are within a 15 min trip:	
Name		Relation	
Address		Phone	
Name		Relation	
Address		Phone	
Name		Relation	
Address		Phone	



ADDITIONAL INFORMATION

School previously attended ______

Prior services received outside of school

Services currently being received outside of school

Please list any additional information your child's teacher should know to best care for your child:

SCHOOL DIRECTORY

I do do not give permission to be listed in the school directory including name, address, email & phone number.

PHOTOGRAPHY PERMISSION

🗌 I do 🗌] do not give permission for photographs	of my child to be used for	⁻ St. Paul's Day School w	ebsite, social media or
printed ma	aterials (names never included).			

I do do not give permission for my child to be photographed for local newspaper articles (names never included).

PLEDGING CHURCH MEMBERS

Are you a pledging member of St. Paul's Episcopal Church? 🗌 Yes 🗌 No	
--	--

If yes, please provide a copy of your most recent pledging statement to receive a tuition discount.

FORMS CHECKLIST

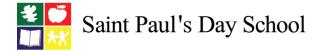
Enrollment Form (pg.1-2)	Universal Health Form (by 7/31)
Authorized Pick Up (pg.3, <i>if applicable</i>)	Immunization Record (by 7/31)
Emergency Form (pg.4)	Allergy Action Plan (by 8/15, if applicable)
Signed Enrollment Contract (pg.5-7)	St. Paul's Church Pledge Statement (if applicable)

I understand that my child may not attend school until all forms are completed and returned to the school office. I understand that all information provided above will be held in a confidential manner by St. Paul's Day School and can only be used with my permission.

Parent's Signature	Da	ate	

Director's Signature _____ Date Received _____

FOR OFFICE USE	ONLY		
Registration	\$	Tuition	\$
Check	#	Check	#
Date		Date	



Child's Name _____

My child may be released to the following people other than parents:

1.	Name	Relation
	Address	Phone
2.	Name	Relation
	Address	Phone
3.	Name	Relation
	Address	Phone
4.	Name	Relation
	Address	Phone

Saint Paul's Day School

The information provided below is the information we will use in an emergency. Your child's health information and this Emergency Form will be duplicated and taken out of the building with us if there were a time that we had to vacate the building due to an emergency. It is **IMPERATIVE** that when your child is in our care that <u>one</u> or <u>all</u> of the parents' telephones are reachable.

Child's Full Name	Date of Birth
Home Address	
Mother's Name	Cell Phone
Employer	Work Phone
Father's Name	Cell Phone
Employer	Work Phone
Doctor's Name	Phone
Preferred Hospital	Allergies

Telephone numbers in the order we should call if we have not been able to reach you. We would call due to illness, early dismissal/delayed opening, or an emergency at school. You must list at least 3 contacts. These people are authorized by you to pick up your child if either parent cannot be reached.

1.	Name	Relation
	Address	Phone
2.	Name	Relation
	Address	Phone
3.	Name	Relation
	Address	Phone

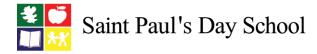
EMERGENCY MEDICAL CONSENT

١,

____, mother/father/guardian of__

do hereby give permission to the personnel of St. Paul's Day School to secure and authorize such emergency medical care and/or treatment as my child might require while under the supervision of the said school personnel. I also agree to pay all costs and fees contingent on any emergency medical and/or treatment for my child as secured under this consent.

Every effort will be made to notify parent immediately in case of an emergency.



Student's Name_

Teacher/Grade

Welcome to St. Paul's Day School (SPDS)! We are thrilled you have chosen us for your child's early education. This contract outlines our policies for the **2022-2023 school year**.

Tuition Payments

A \$75 non-refundable application fee is required upon registration (\$55 for each additional child). Ten equal tuition payments are **non-refundable** and are due as follows:

- Kindergarten & Junior Kindergarten: Payment #1 upon registration
- Preschool: Payment #1 upon acceptance of class assignment in January
- Payment #2 May 5 along with signed enrollment contract
- Payment #3 August 1
- Subsequent payments the first of each month September 1 through March 1

Payments made after the **5th of the month** are subject to a 5% late fee. Returned checks are subject to a \$50 fee. If no tuition payment is made by the 14th of the month, without discussion with the Director, your child will be considered withdrawn and may not continue attending.

Additional Fees

A yearly nonrefundable Parents Organization of the Day School (PODS) **administrative fee of \$25 per family** is due by October 1. This helps PODS conduct events and activities throughout the school year as detailed in the calendar. Please send this as a separate check with "PODS fee" in the memo line.

Withdrawals & Schedule Changes

Withdrawals that take place after enrollment, but prior to July 1, will result in the forfeiture of tuition payments made to date. Since we base our hiring in the Spring on the number of students enrolled at the school, families who elect to withdraw after **July 1** will be responsible for 50% of the tuition for the school year, and those who withdraw after **August 15** will be responsible for the full year's tuition. Any requested changes to your child's class/enrichments schedule must be provided in writing 30 days prior to the change date and can only be made if space is available.

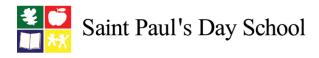
Before/After Care

Before/After Care payments are due by the first of the month of care (Eg. September 1 for September care). If you plan to withdraw from Before or After Care or change days, please provide two weeks notice as this may affect our staffing.

Late Pick Up Policy

The below details our car line pick up times. If you are unavoidably detained, please call the school office to let us know you are on the way. The fine for late pickup is **\$9.00 for every 15 minutes** (or any portion of 15 minutes) past the appropriate pickup time. (A grace period will be allowed in cases of car line back up due to unforeseen circumstances, such as road construction.) If the parent, or person authorized by the parent, fails to pick up a child, we will attempt to reach an alternate authorized pickup person.

2s 11:05-11:15 am	3s & 4s PM session 2:30-2:40 pm
3s & 4s AM session 11:15-11:25 am	Full Day 4s & JK 2:35-2:45 pm
PM Enrichments 2:25-2:30 pm	Kindergarten 2:45-2:55 pm



School Calendar

The upcoming year's School Calendar is available on our website at stpaulsday.org/calendar/. Tuition is not prorated for school holidays, unscheduled closings, early dismissals, student illness or vacations, etc. Families are expected to be aware of all school closings, including Christmas, Winter, Spring and Summer breaks, holidays, and parent/teacher conference days.

School Policies

School policies and procedures are stated in the Parent Handbook, including the Expulsion Policy. COVIDrelated policies and procedures are outlined in the COVID Protocols & FAQ document. These documents are available to view on the Document Center of our website, stpaulsday.org/documents/. All families are expected to review and abide by these policies. An updated copy of the Parent Handbook will be circulated prior to the start of each school year. The COVID Protocols document will be continually updated as new guidance is issued by the NJ Department of Health.

Community Cooperation

Parents acknowledge that SPDS may take all action necessary to ensure the operation of the School in all matters as it may apply to the Student. A positive, collaborative and constructive relationship between the School and Parents or other individuals interacting with the School and/or School community by virtue of their relationship with the Student (the "Affiliated Individuals") is essential to the mission of the School. Thus, if the behavior, communication, or interaction on school grounds, off school grounds (including during Schoolsponsored events) or via electronic or digital means (including, but not limited to, social media or other online forums) of Parents or Affiliated Individuals is disruptive, intimidating or overly aggressive; reflects a loss of confidence in or serious disagreement with SPDS's decisions, strategies, policies, procedures, responsibilities, method of delivery of its program, personnel, leadership or standards; imperils accomplishment of its educational purpose or program; threatens the health, safety or well-being of another member of the School community; or is otherwise inconsistent with commitments shared by members of the community, Parents understand and agree that the School has the right to dismiss the Student and/or the Student's family and/or other Affiliated Individuals from the School community. In addition, parents understand and agree that the School has the right to place restrictions on that party's involvement with or activity at SPDS, on SPDS property, or at SPDS-related events if the party engages in behavior that SPDS determines in its sole and exclusive discretion to warrant such a restriction.

Force Majeure Policy

The school's duties and obligations under this contract shall be suspended immediately, with or without notice, during all periods that the School is closed because of force majeure events including, but not limited to, any fire; act of God; hurricane; war; governmental action; act of terrorism; epidemic; pandemic; or any other event beyond the school's control. This includes if the school needs to close due to a COVID occurrence. If such an event occurs, the school's duties and obligations in this contract will be postponed until such time as the school, in its sole discretion, may safely reopen. In the event that the school cannot reopen due to an event under this clause, the school is under no obligation to refund any portion of the tuition paid. Monthly tuition payments will continue to be due until a child is withdrawn from the preschool; families can withdraw a child with a 30-day written notice. Families will be responsible for the 30 days of tuition during the notice period and cannot be guaranteed a spot for their child when the school may safely reopen.

Release & Waiver of Liability

We acknowledge that we received a copy of the St. Paul's Day School (SPDS) Parent Handbook and COVID Protocols and that we understand and agree to abide by these policies, including the school's policy on nonrefunds in the event of closures for public health emergencies. Knowingly failing to follow these policies may 🚽 Saint Paul's Day School

result in termination from the preschool and forfeiture of the tuition paid to date. In consideration for our family's continued enrollment in SPDS programs and receipt of services we further agree as follows:

- We acknowledge that, if we choose to have our child enter SPDS church or school property and/or participate in SPDS programs, we do so voluntarily and at our own risk and that we hereby release, waive, discharge and covenant not to sue St. Paul's Episcopal Church or St. Paul's Day School, its officers, board members, agents or employees ("Releasees") from and for any and all liability claims, demands, actions and causes of action of any kind or nature, including, but not limited to, claims of negligence, arising out of, or related to any loss or personal injury, including death, that our child or any member of our family may sustain from contracting, or being exposed to COVID-19, as the result of, or in any way related to, our child or any member of our family entering church or school property or participating in school programs.
- This release and waiver of liability shall be governed by the laws of the State of New Jersey. We agree that if any portion of this release and waiver of liability is found to be void or unenforceable, the remaining portions shall remain in full force and effect.
- We acknowledge that this release and waiver of liability will be binding on our family members, spouse, heirs, assigns, personal representatives and anyone else entitled to act on our, or our child's, behalf to the extent and that my signature below shall be deemed as a release, waiver, discharge and covenant not to sue the Releasees to the extent set forth above.
- By signing below, we acknowledge that we have read and fully understand the release and waiver of liability as set forth above and have signed voluntarily and under our own free will.

Termination of Contract

SPDS will make every possible and reasonable accommodation to help all children learn, grow, and thrive in our program. However, there may be rare instances in which the school determines that our program is not the right fit for a child or family. In that event, as much notice as possible will be given so a family can find alternate care. Prorated tuition payments will be refunded if the preschool determines another program will be a better fit. Additionally, all families are expected to follow the policies stated in the Parent Handbook and this contract. If a family does not abide by the policies, a family may be asked to leave without notice. In the rare event that a family is asked to leave due to policy violations, tuition payments to date will be forfeited.

Policy Acknowledgement

Please review the following policies in the **Parent Handbook**, available on our website at <u>stpaulsday.org/documents</u>. Please initial to acknowledge that you have read and understand these policies:

_____ Behavior Guidance & Discipline Policy (pg. 10)

_____ Expulsion Policy (pg. 10-11)

_____ Information to Parents (pg. 21-23)

______ Policy on Health Requirements of Communicable Diseases (pg. 23-24)

_____ Policy on the Release of Children (pg. 25)

By signing this contract, you agree to all policies listed in this contract, those noted above from the Parent Handbook, the COVID Protocols & FAQ, and the School Calendar. We look forward to working with you to build an exciting and fun-filled year of learning and growth with your child.

Parent /Guardian Signature:	Date:	
Director Signature:	Date:	