

**Treasure Cove
Registration Form
The Fellowship at Cinco Ranch – Weekday Preschool for 2012-2013**

Child's Name _____ Date of Birth _____ Sex _____

Child's Address _____ City _____ Zip _____

Home Phone _____ Child lives with: _____ Mother _____ Father _____ Both _____ Neither _____

Mother's Name _____ Work Phone _____ Mobile Phone _____

Father's Name _____ Work Phone _____ Mobile Phone _____

E-mail Address _____

**Please choose the appropriate class based on your child's age as of Sept. 1, 2012
There are 2 pages of class choices.**

CLASS	REGISTRATION FEE	MONTHLY TUITION
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1 Year Olds Class: 12 – 23 Months (Need to be walking)

_____	Monday / Wednesday	\$140.00	\$205.00
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_____	Tuesday/Thursday	\$140.00	\$205.00
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2 Year Olds Class: 24 - 35 Months

_____	Mon. / Wed. / Fri.	\$165.00	\$295.00
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_____	Tuesday / Thursday / Friday	\$165.00	\$295.00
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_____	Monday / Wednesday	\$140.00	\$205.00
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_____	Tuesday / Thursday	\$140.00	\$205.00
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3 Year Olds Class: 36 Months – 47 Months (Need to be potty trained)

_____	Mon. / Wed. / Fri.	\$165.00	\$295.00
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_____	Tuesday / Thursday / Friday	\$165.00	\$295.00
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_____	Monday/Wednesday	\$140.00	\$205.00
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_____	Tuesday/Thursday	\$140.00	\$205.00
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4 Year Old Class

(T-shirt, field trips, and graduation will be a one time \$45 activity fee with the August payment)

___	Monday – Friday (limited availability)	\$260.00	\$475.00
___	Mon. / Wed. / Fri.	\$165.00	\$295.00
___	Tues./Thurs./Fri.	\$165.00	\$295.00
___	Tuesday / Thursday	\$140.00	\$205.00
___	Monday/Wednesday	\$140.00	\$205.00

Transition Class (by teacher or director recommendation)

(T-shirt, field trips, and graduation will be a one time \$45 activity fee with the August payment)

___	Monday – Thurs	\$210.00	\$390.00
___	Monday – Friday	\$260.00	\$475.00

I/we further understand that Treasure Cove incurs expenses of a continuing nature, and that in order for it to plan and maintain services, the total amounts due above must be assured. Accordingly, I/we obligate myself/ourselves to pay in advance all monthly tuition and fees due, even if the student is unable to attend; no refunds are made for absences, illness, nonattendance, disciplinary reasons, scheduled class closings, and holidays.

I/we agree to comply with the rules and policies of Treasure Cove now existing or hereafter made. I/we further agree to release Treasure Cove, the Fellowship at Cinco Ranch, and their officers, directors, agents, employees, volunteers, and contractors and each of them and hold each of them harmless from and against any and all claims of liability or injury to the student(s), whether on church premises or otherwise.

Parent or Guardian Name: _____ Date: _____

Attach Non-refundable registration check payable to: Treasure Cove

Treasure Cove

Financial Agreement

The Fellowship at Cinco Ranch: Weekday Preschool Program

Please initial each statement to acknowledge acceptance of these terms.

_____ I understand that the registration fee is required to secure a spot for my child and that this fee is Non-Refundable unless there are no places open for my child in the appropriate class for the applicable session. In that case the Registration Fee will be refunded promptly.

_____ I understand that Treasure Cove incurs expenses of a continuing nature, in order for it to plan and maintain services, the total amounts due above must be assured. Accordingly, I/we obligate myself/ourselves to pay in advance all monthly tuition and fees due, even if the student(s), or any of them, are unable to attend; no refunds or "make ups" are made for absences, illness, nonattendance, disciplinary reasons, scheduled class closings, and holidays. Treasure Cove will follow the KISD calendar except for start and end dates and no more than 3 staff development days.

_____ I understand that monthly tuition fees are Non-Refundable unless (a) prior to the start of the semester my child's spot is filled within 5 working days before the start date; (b) if tuition is paid for a semester or year, (30) thirty days of advance written notice of intent to withdraw is required and the refund will be prorated; and (c) if withdrawal occurs within the final thirty days of a semester, no prorated refund will be made.

_____ I understand that tuition is due on the first day of each month. Tuition not paid by the 10th day of each month will be subject to an additional \$20.00 late charge. A \$25.00 fee will be added to all returned checks. I will prepay tuition as follows:

\$205 tuition for the 2 day a week programs beginning August 1, 2012

\$295 tuition for the 3 day a week programs beginning August 1, 2012

\$390 tuition for a 4 day a week program beginning August 1, 2012

\$475 tuition for the 5 day a week programs beginning August 1, 2012

*(Activity fee due August 1, 2012 for the 4 year old class and transition class)

_____ I understand that children not picked up by 2:10 P.M. will be left in the Director's care. I will pay a late pick up fee of \$5.00 from 2:10-2:15 and an additional \$3.00 per every five minutes thereafter. Late pick up fees will be paid directly to the Director.

_____ I understand that a reasonable level of discipline and order are required. During rest time, all children are required to remain quiet and be on their mats for a minimum of 20 minutes. I understand that I will be required to pick up my child early on any day that he/she is unable to follow this guideline during rest time. Tuition will not be prorated.

I have read and understand this Financial Agreement.

Name of Child _____

Parent or Guardian Signature _____ Date _____