

and also their website password!!

# The Corcoran School Student Application

Student's Name:		Sex:	Birthdate:	(mm/dd/yyyy)
Contact Information	on #1:			
Parent / Guard	ian's Name:			
Work Phone:				
Cell Phone:				
Home Phone:				
Email Address:				
Address:				
4-Digit Unique	Code:(Used for Building	Access and V	 Vebsite Password)	
Contact Information	on #2: (Optional)			
Parent / Guard	ian's Name:			
Work Phone:				
Cell Phone:				
Home Phone:				
Email Address:				
Other Important Infor	mation / Special Needs:			
For Office Use Only:				
Account Username*:	(First 8 characters of last	name - Must be	 e unique in ProCare)	

\* Notify parents that this is the website username and their unique 4-digit code is their building access code



### **Authorization for Dismissal**

Please fill out the following form as to who is authorized to pick-up your child from our school. Remember to inform these people that they must present proper identification before we may release your child to them. Also, remember to notify our staff that someone other than yourself will be picking up / dropping off your child.

Student's Name:	_
Authorized Pick-up / Drop-off Information #1:	
Authorized Name:	
Relationship:	
Contact Phone #:	
Authorized Pick-up / Drop-off Information #2:	
Authorized Name:	
Relationship:	
Contact Phone #:	
Authorized Pick-up / Drop-off Information #3:	
Authorized Name:	
Relationship:	
Contact Phone #:	
Signature of Person Responsible for Payment  *** It is extremely important to keep this information current.	Date (mm/dd/yyyy)



# Financial Agreement: Terms & Conditions (Page 1 of 3)

### **TUITION WORKSHEET**

Deposit:		(One week's tuition)		
Registration Fee	:		\$150	
Infants (6 weeks	-18 months):	(full-time only)		
Toddlers (18 mo	nths-3 years):	(full-time)		
		(part-time)		
Preschoolers (3y	rs to 4yrs):	(full-time)		<del></del>
		(part-time)		
Pre-Kindergarte	n (4yrs to 5yrs)	(full-time)		
		(part-time)		
Kindergarten (5	yrs)	(full-time only)		
Internet Camera	Viewing:		Included	
AGREEMENT:				
I desire to enroll my child:		_ on		
Star	ting date:			
For the following da	ays and times:			
Monday	Tuesday	Wednesday	Thursday	Friday

<sup>\*\*</sup>NOTE\*\* Tuition is based on your child's schedule, not on your child's attendance.



# Financial Agreement: Terms & Conditions (Page 2 of 3)

Please	Initial Your Preferred Payment Option:
	I desire to have tuition automatically deducted from my checking/savings account.
	I desire to have tuition automatically charged to my credit card. With the credit card option, there is a 3% convenience fee.
Please	Initial Each Statement Below:
	I understand and agree that billing will begin on the date I have indicated as my child's starting date unless I give at least 1 month notice to change this date.
	I understand and agree that all deposits and registration fees are non-refundable.
	I understand and agree that tuition is based on my child's schedule, not on my child's attendance.
	I understand and agree that I will be billed additionally for any time that deviates from my child's schedule. (i.e. dropping off before my scheduled drop-off time, or picking up later than my scheduled pick-up time)
	I understand and agree that the full-time tuition rate is based on a maximum of 50 hours over 5 days. Any time my child attends in excess of this will be charged an additional hourly rate.
	I understand and agree that I will be charged \$10 per day in late fees for tuition not paid in full within 3 days of its due date and will incur \$36 fees for any returned checks.
	I understand and agree that I must give at least 2 weeks written notice before I disenroll my child or I will be charged for the remaining two week's tuition. *Should proper notification in a timely manner not be provided, I acknowledge and agree that upon my child's disenrollment, I The Corcoran School to deduct two weeks tuition from my account in one single payment.
	I understand and agree that my tuition does not include optional services such as take home meals, dry cleaning, karate, dance class, etc.
	I understand and agree that if my tuition falls delinquent for more than a week, I may be asked to disenroll from the school until the balance has been paid in full.
	I understand and agree that I will not solicit or accept in-home babysitting/childcare opportunities from any current or former employee of The Corcoran School unless that employee hasn't worked for The Corcoran School for more than 6 months.



## Financial Agreement: Terms & Conditions (Page 3 of 3)

I AGREE TO PAY THE TUITION FOR THE DAYS AND TIMES STATED ABOVE AND I WILL INCLUDE PAYMENTS FOR ANY EXTRA DAYS AND OVERTIME IN MY WEEKLY PAYMENTS. I UNDERSTAND EACH OF THE ITEMS I HAVE INITIALED ABOVE. I ALSO UNDERSTAND THERE WILL BE NO CREDITS ISSUED FOR ABSENCES DUE TO ILLNESS OR OTHER CAUSES. I ASSUME PERSONAL AND INDIVIDUAL RESPONSIBILITY FOR ALL CHARGES, INCLUDING THOSE OF A COLLECTION AGENT IF NECESSARY. I HAVE READ, UNDERSTOOD, AND AGREE TO THE TERMS AND CONDITIONS OUTLINED IN THE PARENT INFORMATION MANUAL.

Drivers License #	State	Social Security Number
Signature of Person Rest	onsible for Payment	Date (mm/dd/yyyy)



## Receipt and Acknowledgment of Parent Information Manual

Please read the following statements, sign below and return.

<u>Understanding and Acknowledging Receipt of the Parent Information Manual</u>

I have received and read my copy of the Parent Information Manual. I understand that the policies and procedures described in it are subject to change at the sole discretion of the school at any time.

### **Voluntary Enrollment**

I understand that my enrollment is voluntary and I may disenroll my child at any time. The facility does require a two-week, written notice of my intent to disenroll my child. If two weeks notice is not given, I understand that I am required to pay for those two weeks whether or not my child attends the school. I understand that the school does have the right to disenroll my child without notice, if there is due cause. I understand that I would not be required to pay for any time that my child did not attend the school if my child was disenrolled.

### Non-Compete Agreement

I understand that I cannot accept private childcare from a former or current employee of any Corcoran School for a period of 6 months following my disenrollment from the school or the former employee's termination from the school. This also includes babysitting services. Should I accept such opportunities, I understand, acknowledge and agree that I will be liable for 6 months of full time tuition to The Corcoran School at the current published tuition rates.

#### Confidential Information and Social Networking

I am aware that during the course of my involvement with The Corcoran School, personal information may be made available to me regarding employees, other students, other parents, and business information. I understand that this information is proprietary and critical to the success of the company and must not be given out or used outside of the company's premises or with non-company employees. In the event of my disenrollment from the facility, whether voluntary or involuntary, I hereby agree not to utilize or exploit this information with any other individual or company.

I understand and agree all employees of The Corcoran School must follow a strict social networking policy, and that I will not solicit or accept any social networking "friending" or "following" of any employee of The Corcoran School.

Signature of Person Responsible for Payment	 Date (mm/dd/yyyy)
Signature of Ferson Responsible for Fayineill	Date (IIIII/dd/yyyy)