

LAKEVIEW MONTESSORI SCHOOL ON THE HILL

211 Wood Street, Sugar Land, TX 77498
 Phone: 281-494-2667, Fax: 281-494-2707
 E-mail: lmschool@windstream.net

**Please attach
a recent
photo of your
child.**

2020-2021

Student's Name: (First) (Middle) (Last)			Application Date :		Director's Name: Clarissa Guidry	
Female <input type="checkbox"/>	Male <input type="checkbox"/>	Date of Birth:	Nickname:			
Returning Student <input type="checkbox"/>		New Student <input type="checkbox"/>		Student's Home Number:		
Home Address Street:			City:	State:	Zip Code:	
Siblings Attending LMS: <input type="checkbox"/> Sibling Names:						
Child Lives With: <input type="checkbox"/> Mom <input type="checkbox"/> Dad <input type="checkbox"/> Both Parents <input type="checkbox"/> Guardian Previous School Attended:						

Father's Name: (First) (Last)		Mother's Name: (First) (Last)	
Home Phone Number:		Home Phone Number:	
Cell Number:		Cell Number:	
E-Mail Address:		E-Mail Address:	
Employer:		Employer:	
Occupation:		Occupation:	
Employer Phone Number:		Employer Phone Number:	

AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION

I hereby grant permission for the staff of Lakeview Montessori School to contact the following medical personnel to obtain emergency medical care if warranted

Name of Physician	Address	Phone
Name of Hospital	Address	Phone

I hereby give consent for necessary emergency treatment when my child is in the care of this physician and/or Hospital/Clinic.

Signature of Parent or Legal Guardian _____

Person(s) to Contact in an Emergency (If unable to reach parents):		
Name:	Home:	Cell:
Address:	Relationship:	

I hereby authorize Lakeview Montessori School staff to allow my child to leave the child care facility **ONLY** with the following persons. *(Please include Emergency Contact person from above and list only individuals other than parents of the child.)*

1.	2.	3.
Address and Phone Number	Address and Phone Number	Address and Phone Number

OFFICE USE ONLY			
Application Fee:	Registration Fee:	Material Fee:	Deposit:
Enrollment Date:	Program:		
Classroom:	Referred By:	T-Shirt:	

**REGISTRATION AND APPLICATION INFORMATION
2020-2021**

REGISTRATION FEE AND PROCEDURES

New students

New Students who wish to enroll at LMS begin by completing and submitting the LMS Application with a **\$25 non-refundable** application fee. Please submit one application for each child. If an opening is not immediately available, your child(s) name will be placed in the appropriate class waiting pool. As soon as an opening exists, a child-teacher meeting and parent orientation will be scheduled to determine the child's readiness, class placement and date of admission. Upon acceptance, the child is enrolled at LMS. **Our Class Ratios: Toddler 6:1 and Primary 14:1.** Placement is determined by the needs of the classroom.

Returning Students

Returning students must follow all enrollment procedures. All returning students are given priority enrollment. An annual re-enrollment fee of **\$40 (PER CHILD)** IS DUE UPON RE-ENROLLMENT. **THIS FEE IS NON-REFUNDABLE.**

SIBLING DISCOUNTS

A 10% tuition discount is given on the lower tuition for enrolled siblings.

ENROLLMENT AND PROCEDURES

The enrollment fee, activity/supply fee and deposit are due upon enrollment. The enrollment fee for new students is **\$50** and is non-refundable. The activity/supply fee is **\$175** per child and is non-refundable. The deposit is equal to one half of a full month's tuition and is held until the child is withdrawn. **The deposit is strictly non-refundable except for school-initiated dismissal of student(s) or family while in attendance, unless a 30 day written notice of withdrawal is given.**

WITHDRAWAL PROCEDURES

_____ *Please acknowledge that you have read the following withdrawal procedure.*

All new students are accepted on a six-week trial basis. The six-week trial enrollment serves to determine if LMS can meet the child's and/or parent's needs. Tuition and fees are non-refundable except for school-initiated dismissal. However, the deposit may be refunded if the proper 30-day written notice is given. Without this written notice, the deposit will be forfeited. The school reserves the right to terminate the attendance of any student or family whose presence is considered by the school to be detrimental to the best interest of the school.

SPECIAL ACTIVITIES PERMISSION

TRANSPORTATION FOR SCHOOL-AGERS:

I hereby **give** **or do not give** my consent for my child to be transported and supervised by facility staff before/after classes at:

Lakeview Elementary School:
314 Lakeview Dr. Sugar Land, TX 77498
281-634-4200

NEIGHBORHOOD WALK:

I hereby **give** **or do not give** my consent for my child's participation in supervised neighborhood walks

WATER ACTIVITIES:

I hereby **give** **or do not give** my consent for my child to participate in supervised water activities:

Sprinkler Play Water Table

MEDIA AUTHORIZATION: I hereby **give** **or do not give** my consent for my child to be photographed, and for those photographs to be distributed among parents, used for advertising purposes, and posted on the school's Photo show site and website.

I understand that my child will be served breakfast (if enrolled in full day) am & pm snack and lunch each day.

Child daycare operations are public accommodations under the Americans with Disabilities Act (ADA), Title III.

If you believe that such an operation may be practicing discrimination in violation of Title III, you may call the ADA Information Line at (800) 514-0301 (voice) or (800)-514-0383 (TTY).

Signature - Parent or Legal Guardian

Date

**GENERAL ENROLLMENT INFORMATION
2020-2021**

MY CHILD WILL BE IN CARE:

- | | | |
|--|--------------|------------|
| <input type="checkbox"/> Mondays | from: | to: |
| <input type="checkbox"/> Tuesdays | from: | to: |
| <input type="checkbox"/> Wednesdays | from: | to: |
| <input type="checkbox"/> Thursdays | from: | to: |
| <input type="checkbox"/> Fridays | from: | to: |

MEDICAL HISTORY

Prior to the first day of school the Health Requirements form, including current immunization record, must be submitted to the school office. The immunization record is required to remain current while your child is in attendance. Please submit updated shot records after your child's 4th, 5th and 6th birthdays.

Any known allergies? _____

Treatment needed? _____

Food Allergy & Anaphylaxis Emergency Care Plan provided. Have Physician fill out and return to school.

Dietary restrictions? _____

Does your child have any special conditions or needs that the school should be made aware of for your child's safety? Please list any existing illness, previous serious illness and injuries, hospitalizations during the past 12 months, and any medications prescribed for continuous, long-term use.

SNACKS

Nutritious morning and afternoon snacks are provided by parents on a rotating basis. Parents are notified through the monthly newsletter and weekly by the teachers. Snack requirements and procedures are listed in the Parent Handbook.

BREAKFAST

Breakfast will be provided for students enrolled in the full day program who arrive **before 8:00 a.m.** Please be advised that children arriving at or after 8:00 a.m. will not be served breakfast. Morning snacks are served by 9:00 a.m. in each class. **PLEASE DO NOT** send your child to school after 8 a.m. with breakfast. After 8 a.m., adequate staffing to monitor this activity is no longer available.

LUNCH

Road Runner Foods is the catered lunch provider for LMS. Total cost of lunches varies per month and is payable to Lakeview Montessori on the Hill. Prices are \$4.25 a day for the 2020-2021 School year.

INSECT REPELLENT

I hereby **give** or **do not give** my consent for my child to have "Off Family" repellent applied as needed. **Each Child is to donate one bottle of this product to the school upon enrollment.**

SUNSCREEN

I hereby **give** or **do not give** my consent for my child to use of Aveeno Baby Continuous Protection Lotion.

Each Child is to donate one bottle of this product to the school upon enrollment.

DIAPER CREAM (TODDLER'S ONLY)

I hereby give or do not give my consent for my child to have diaper cream applied as needed.
Each family is asked to supply the school with their preferred ointment, labeled with the child's name.

FEE SCHEDULE 2020-2021

The school year begins August 3rd 2020 and ends May 28th 2021. The tuition is broken down into the monthly payments shown below: Please mark with an "X" the schedule you have chosen.

Toddler Class Time Monthly Tuition
(18 mos. – 3yrs.)

Half-Day	8:30-12:00	\$730	
Extended Day	8:30-2:30	\$840	
Full Day	6:30-6:30	\$980	

Pre-Primary Class
(3 yrs – 6 yrs)

Half-Day	8:30-12:00	\$685	
Extended Day	8:30-2:30	\$800	
Academic Extended Day	8:30-2:30	\$800	
Full Day	6:30-6:30	\$950	

Public School Students

Before School Only		\$269	
After School Only		\$369	Inc. Holidays: \$420
Before & After School		\$456	Inc. Holidays: \$500 <i>Full day during holidays</i>

Payments are due on the 1st business day of the month. Your payment will be considered late after the **third business day of the month. A **10%** late fee will then be added to your invoice. **The returned check fee is \$30.**

****A late pick-up fee of \$10 per child for the first 5 minutes and \$1.00 a minute thereafter. If a parent is late picking up for ½ day or extended day the charge will be added to your monthly statement for any child left at school after their chosen schedule has ended. If a child is left at the school after 6:30 pm, please make payment directly to the staff member who stayed late with your child.**

**Please be advised that there are additional registration and material fees if you choose to register your child in our summer school program.

GANG FREE ZONE

Under the Texas Penal Code, any area within 1,000 feet of a child care center is a gang-free zone, where criminal offenses related to organized criminal activity are subject to harsher penalties.

PRIVACY STATEMENT

DFPS values your privacy. For more information, read our Privacy and Security Policy online at:
<http://www.dfps.state.tx.us/policies/privay.asp>.

ENROLLMENT CONTRACT

This is to confirm my intention to enroll _____ in the _____ program at Lakeview Montessori on the Hill for the 2020-2021 academic year subject to the following terms:

1. _____ A security deposit equal to one half month's tuition is due with this agreement and will be credited to the student's account for the above noted school year. The receipt of this deposit and the signed Agreement constitutes a contract that the student will attend Lakeview Montessori on the Hill as noted above. The security deposit is non-refundable if the undersigned fails to provide Lakeview Montessori School on the Hill with no less than 30 days written notice of the child's withdrawal from the school. It is also acknowledged that Lakeview Montessori School may apply all or any part of the security deposit to any outstanding amount due in lieu of past-due tuition or fees. Any remaining balance of such security deposit shall not be refunded at the time of withdrawal.
2. _____ In accepting this Agreement, the undersigned accepts the responsibility for tuition for the full school year. Lakeview Montessori on the Hill reserves the right to cancel the student's enrollment if payments are not made by the agreed upon due dates. Payments are considered late if they are not paid within **3 business days** of the due date. Late payments are subject to a **10%** fee per month. In cases of failure to pay, the parent or guardian who is responsible for payment agrees to pay, to the extent permitted by law, the school's expenses of enforcement and collection, including attorney's fees and costs. Returned check fees are assessed fees based on the school's bank policy.
3. _____ Tuition is not pro-rated for prolonged absences, inclement weather, vacations, closure of the school for teacher or classroom preparation, school holiday closures or illness in which the child does not attend school.
4. _____ I give any staff member of Lakeview Montessori on the Hill, Inc. the right to retain my child if the person responsible for picking up the child appears to be under the influence of alcohol or a controlled substance.
5. Lakeview Montessori on the Hill, Inc. reserves the right to terminate this contract (1) if the parent or guardian does not consistently follow policies and guidelines as outlined in the Lakeview Montessori School Parent Handbook; (2) if the student's behavior or lack of cooperation is deemed unacceptable; or (3) if the student poses a physical or psychological threat to themselves, staff, or another child within the school environment; or (4) if tuition payments are overdue or (5) if the family consistently displays a level of disrespect toward administration or staff. If Lakeview Montessori School on the Hill, Inc. exercises its right under this section to terminate the contract, appropriate tuition rebates will be determined on a case by case basis.
6. _____ I have been advised that Lakeview Montessori on the Hill guarantees that the catering company providing optional meals follows the nutritional guidelines set forth by TDFPS. If I choose to provide meals from home, I understand that the operation is not responsible for the nutritional value or for meeting my child's daily food needs.
7. _____ I understand that my child will be given a nap mat upon enrollment at the cost of \$30. The school will provide my child a sheet and blanket.
8. _____ I agree to participate in and attend the parent orientation night at the beginning of the school year and to attend parent education meetings during the year.
9. _____ I Acknowledge receipt of the operational policies including those for discipline and guidance.

I have read and understand the above Agreement. I am responsible for the payment of tuition and fees for the 2020-2021 school year. I authorize Lakeview Montessori School on the Hill, Inc. to collect any payment to which they are entitled, and to bill me for any amount due.

Signed _____ Date _____

Print Name _____

All children regardless of race, color, creed, nationality, or ethnic origin are eligible for enrollment. All families are welcome regardless of race, color, creed, nationality, sexual orientation or ethnic origin.