

Treasure State Academy Preschool Registration

- Preschool I - Must be 3 years of age by September 10th of school year
Days: Tuesdays and Thursdays
Time: 9:00am – 11:30am
Fees: \$35.00 Registration Fee
*\$80.00 Monthly Tuition- Due on the 1st of every month
- Preschool II - Must be 4 years of age by September 10th of school year
Days: Monday, Wednesday, Friday
Time: 9:00am – 11:30am
Fees: \$35.00 Registration Fee
*\$95.00 Monthly Tuition- Due on the 1st of every month

*A \$10.00 fee is added for payments after the 15th of the month. The monthly tuition fee is one year's total tuition divided by 9 months. This takes into account all holidays and any other scheduled days off from school. Monthly fees will not be pro-rated for days missed due to sickness, vacation, and scheduled days off, etc. All payments must be made at the front desk (main floor) of the school office. Or, for your convenience, there are two payment drop boxes. One is located outside the preschool room, and the other is located beside the main office counter on the wall. If a balance remains after the end of the month, the student will be dropped from class until the balance is paid in full.

Note: Children are required to be completely potty trained, as we do not have the facilities nor the staff required for diaper changing.

Please complete the following:

Child's Full Name: _____

Male Female

Home Address: _____

Home Phone#: _____ Cell Phone#: _____

Child's Birth Date: _____

Any Allergies or Other Medical Problems: _____

Mother's Name: _____
Address and Phone#: (if different from child's) _____
Work Address and Phone #: _____
Father's Name: _____
Address and Phone#: (if different from child's) _____
Work Address and Phone #: _____
Parent's Marital Status: Single Married Divorced
Other Numbers To Call In Case Of Emergency: _____

Please List All Adults *Authorized To Take Child From School:

*Unauthorized persons will be not allowed to remove any child from school property. Authorization must be written and signed by parent (if not named above) and be hand-delivered. If there are any special circumstances the school should be aware of, please explain on a separate sheet of paper and attach it to this form. Thank you.

Current vaccination/immunization records (on blue form IZ HES101 which is required by the city/county health dept) must accompany this form. Child may not begin school until proper records are on file.

I agree to all of the above registration, schedule, fee, and otherwise mentioned information. I give permission for my child to take part in all school activities, including field trips away from the school premises, and absolve the school from liability to me or my child because of any injury to my child at school or during school activities (notification will be given in advance and a separate consent form provided requiring parent signature for each field trip away from school premises).

Print Name and Relationship to Child

Signature

Date