

 Registration Agreement 2019 – 2020

***Inspired by Jewish values, we cultivate inquiring minds, nurture compassionate hearts and develop joyful communities***

**Name of Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex M F**

**Birth date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child’s Nickname\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 PROGRAM SELECTION – **PLEASE CIRCLE**

 Member Rate Non – Member Rate

Two Year Old Program

 M/W/F 9:15 a.m. – 1:00 p.m. $4,285 ($476/month) $5616 ($624/month)

 T/W/TH 9:15 a.m. -1:00 p.m. $4,285 ($476/month) $5616 ($624/month)

 M–F 9:15 a.m. – 1:00 p.m. $5304 ($589/month) $6696 ($744/month)

Three Year Old Program

 M/W/F 9:15 – 1:00 p.m. $4,285 ($476/month) $5616 ($624/month)

 M-F 9:15 – 1:00 p.m. $5304 ($589/month) $6696 ($744/month)

PreK Program

 M-F 9:15 – 1:00 p.m. $6027 ($670/month) $7846 ($872/month)

**Pre-K Enrichment – Tuesday and Wednesday** $1550 ($172/month)$1669 ($185/month)

**1:15 p.m. – 3:00 p.m.**

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May 2020 tuition: + $\_\_\_\_\_\_\_\_\_

**May 2020 Kind. Enrich** + $\_\_\_\_\_\_\_\_\_ **(For pre-k students only)**

Building Fund: + $150.00 (non-congregants only)

**Non-Refundable Deposit Total: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Monthly tuition will be billed September 1, 2019 – April 1, 2020**

EXTENDED HOURS – 2019-2020

For children twenty-four months to 5 years

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Name of Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex M F

Birth date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Child’s Nickname\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FULL DAY PRESCHOOL**

**8:00 A.M – 6:00 P.M MONDAY – FRIDAY**

**$16,524 ($1836.00/MONTH) – NON-CONGREGANTS**

 **$13,619 ($1513.00/MONTH) - CONGREGANTS**

**EXTENDED DAY PROGRAM SELECTION**

**CONGREGANT NON-CONGREGANT**

**8:00 - 9:00 A.M. (M-F) $161/MO $221/MO**

**1:00 – 3:00 P.M. (3 DAYS) $172/MO $189/MO**

**1:00 – 3:00 P.M. (5 DAYS) $270/MO $286/MO**

**1:00 – 6:00 P.M. (3 DAYS) $489/MO $513/MO**

**1:00 – 6:00 P.M. (5 DAYS) $816/MO $891/MO**

Registration Fee**: $100.00 (full day only)**

One month’s tuition**: + $\_\_\_\_\_\_**

**Kinder. Enrichment + $\_\_\_\_\_\_ (Pre-k only)**

Building Fund: **+ $150.00 (non-congregants and full day only)**

**Non-Refundable Deposit Total: $\_\_\_\_\_\_\_\_\_\_\_\_\_ = Reg. Fee + one-month tuition+ (Kindergarten Enrichment) + Bldg Fund**

 **The deposit is non-refundable.**

**Monthly tuition will be billed beginning September 1, 2019**

***Drop In* rate is $15.00/hour or any part of any hour with 24 hours’ notice and based upon availability.**

**PLEASE COMPLETE BOTH SIDES OF EACH PAGE OF REGISTRATION FORM**

 Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Early Registration**

Submit registration form along with May 2020 tuition and building fund fee (if applicable) by Friday March 8, 2019 and the $100.00 registration fee will be waived. After March 8 registration will be open to new families, the community at large and the registration fee will apply.

**Non-refundable registration fee, building fund fee and one month’s tuition must accompany Parent/Guardian *signed* registration form. Placement will be on a first come basis after March 8, 2019.**

Monthly tuition payments are due on the first of each month beginning Sept 1, 2019 and continue through April 1, 2020.

We offer a 5% sibling discount applied to the lower sibling tuition.

Checks should be made payable to NVHC Preschool, 1441 Wiehle Avenue, Reston, VA 20190.

In order to coincide with Fairfax County Kindergarten admission policy, children need to be of age by September 30th.

**AVAILABLITY OF ALL PROGRAMS IS DEPENDENT UPON MINIMUM ENROLLMENT**

**Late Fees:** NVHC Preschool reserves the right to charge a late fee of $10.00 each time tuition payments are received after the tenth of the month. If an account remains delinquent after a period of 30 days, NVHC Preschool reserves the right to suspend the child’s attendance until the account is brought up to date, whether or not the parents have received written notice of the delinquency of the account. Parents continue to be liable for tuition payments during the period their child is refused admittance because of non-payment**.**

**Returned Check Fees:** Checks returned by the bank for any reason will be assessed a fee of $25.00 plus any and all bank charges assessed to NVHC Preschool for the returned check.

**Late Pickup Fee:** Children must be picked up from NVHC Preschool no later than 1:05 p.m. After 1:05 p.m., a late fee of $5.00 will be charged. An additional $15.00 will be charged for each additional 15 minutes that a parent is late.

**Termination**: Parents agree that NVHC Preschool may, at its sole discretion, unilaterally terminate this contract if, after at least six weeks, a child fails to adjust to school. Under such circumstances, the teacher, after consultation with the parents and the Director of Early Childhood Education, may request that the child be withdrawn. If a child is withdrawn and the contract is terminated, parents will not be responsible for remaining tuition. All prepaid tuition will be refunded less any tuition and fees still owed.

**Suspensions and Expulsions**: NVHC Preschool reserves the right to suspend or expel any child, for any good cause including, but not limited to, persistently disruptive behavior or any act which threatens the health or safety of another person.

 a.) If a child is suspended, parents will still be liable for remaining tuition.

 b.) If a child is expelled and the contract terminated, all prepaid tuition will be refunded less any tuition and fees still owed. Parents will be released from responsibility for remaining tuition.

**Release from Contract**: If a student moves outside a 20-mile radius of NVHC Preschool and written notification of the student’s withdrawal is submitted to NVHC Preschool 30 days prior to the date of withdrawal, the parents will not be responsible for remaining tuition.

If the child is withdrawn by the parents for any other reason, parents will still be responsible for the remainder of the school year tuition unless NVHC Preschool fills the opening created by the child’s withdrawal.

**Mandatory Forms:**

Commonwealth of Virginia School Entrance Health Form: Parents agree to submit this certificate signed by a licensed physician prior to the child’s entrance into school each year.

 Proof of Identity and Age: Parents agree to submit either a certified copy of their child’s birth certificate, notification of birth (hospital, physician, or midwife record), birth registration card, or passport as proof of identity and age prior to the child’s entrance into school.

The parents understand that their child will not be admitted unless a completed health form, proof of identity and age and all other required forms as stated in the Handbook are on file.

This contract is binding in its entirety and may not be altered in any way.

This contract shall be accepted only if signed by both parents (and legal guardians). Exceptions to this requirement may be made upon request if NVHC Preschool deems the reason sufficient.

**I understand and agree to the terms of this agreement.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ Parent(s) Name(s) (Please Print) Parent(s) Signature(s) Date**

**COMPLETE NEXT PAGE**

**Child’s Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mother/Guardian First Name Last Name**

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 City State Zip Code

Home Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Father/Guardian First Name Last Name**

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Cell Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Name, Age and Gender of Siblings**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Previous preschools attended:**

 Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dates Attended\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dates Attended\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**How did you hear of NVHC Preschool?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please list any allergies (including food allergies):**

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**Please list any behavioral, medical or physical special needs your child may require:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Please list any support services your child has or is currently receiving:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**OPT OUT**

**My child’s name, likeness or voice in any videotape, television, motion picture production, audio recording, website or still photograph may not be used during the 2018 -2019 school year that may be produced and made available to the public by Northern Virginia Hebrew Congregation.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_**

**Parent’s Name (please print) Parent’s Signature Date**

**EXCEPTIONS TO OPT OUT**

**My child’s image only may be used for internal school weekly constant contact newsletter sent to Preschool families.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_**

**Parent’s Name Parent’s Signature Date**

**My child’s image may be used for internal congregational or preschool use but not be made public by the school or Northern Virginia Hebrew Congregation.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent’s Name Parent’s Signature Date**