



Ponderosa Montessori School
 304 Rover Blvd
 White Rock, NM 87547

(505) 672-9211 / (505) 672-9218 Fax
 Web: PonderosaMontessori.com
 Email: school@PonderosaMontessori.com

OFFICE USE ONLY

Date Received: _____ By: _____

Non-Refundable Registration Fee = \$300/Child

Check #: _____ Date: _____ Amount: _____

First Month's Tuition

Check #: _____ Date: _____ Amount: _____

Admission Date: _____

FALL 2020-2021 ENROLLMENT AGREEMENT

This Agreement is made between Ponderosa Montessori School and the Parent(s)/Guardians listed below for the care of the following children:

Child's Name	Sex	Birth Date	Class (See Below)			Napping?
	Circle One		Circle One			Circle One
	Male Female		Infant EC	Toddler Elem	Trans AS	Yes No
	Male Female		Infant EC	Toddler Elem	Trans AS	Yes No
	Male Female		Infant EC	Toddler Elem	Trans AS	Yes No

Daily Schedule (Time must be consistent Daily)

	Drop-Off	Pick-Up
Monday	_____ AM _____ PM	_____ AM _____ PM
Tuesday	_____ AM _____ PM	_____ AM _____ PM
Wednesday	_____ AM _____ PM	_____ AM _____ PM
Thursday	_____ AM _____ PM	_____ AM _____ PM
Friday	_____ AM _____ PM	_____ AM _____ PM

Class:

Infant	(6 wk – 11 mo)
Toddler	(12 mo – 23 mo)
Transition	(2 – 3 yr)
Early Childhood	(4 – 5 yr)
Elementary	(K – 6 th)
After-School	(K – 6 th)-Fall

The above times and days are not flexible. Any changes to the schedule must be made using the Schedule Change Form and with prior written approval of the Ponderosa Montessori School Director. I understand that the first schedule change is free and any changes thereafter are \$25/Child. Late Pick-Up, Early Drop-Off, and Drop-In fees will be charged, and Parent(s)/Guardian(s) agree to pay, in accordance with the policies set forth in the Ponderosa Montessori School Handbook ("Handbook"). If Parent/Guardian is going to be late picking up the child, every effort must be made to contact Ponderosa Montessori School.

Mother/Parent/Guardian

Father/Parent/Guardian

Name: _____

Work Phone: _____

Cell Phone: _____

Home Phone: _____

Social Security #: _____

E-mail: _____

Street Address: _____

City / State / Zip: _____

Employer: _____

Work Schedule: _____

BACKGROUND INFORMATION

(Religion) _____ (Are parents divorced or separated?) _____ (Other adults in the house) _____

(Special circumstances such as joint custody, restraining orders, adoptions, etc.) _____

Ponderosa Montessori School Policy states that children will not attend another school part-time. Exceptions will be made for children with specialized needs not provided by Ponderosa Montessori.

Does your child have specialized needs? No Yes If yes, explain: _____

Previous schooling? _____ How did you hear about Ponderosa? _____

COMMENTS ON CHILD'S DEVELOPMENT (note allergies, habits, language, special needs or outside services that he/she is receiving, unusual situations in the home or child's life that would be useful for understanding the child)

INFORMATION REQUIRED BY STATE LAW

IMMUNIZATIONS

Children must have all State of New Mexico required immunizations. Please provide a copy of your child's current immunization records or waiver. Immunizations are required prior to first day of school.

EMERGENCY CONTACTS **Required: Two (2) In-Town (other than parents) plus Physician**

(Name and Relationship) _____ (Address) _____ (Phone #) _____

(Name and Relationship) _____ (Address) _____ (Phone #) _____

(Name of Physician) _____ (Name of Physician Facility/Hospital) _____ (Phone #) _____

The school will contact parents at home or at work should a child become ill. Should a medical emergency exist, the school will call the local 911 number in addition to contacting the parents. The school and the staff will be absolved of any charges or liability in so doing.

The payment for care of each child shall be monthly, based upon the latest Tuition Schedule and each child's schedule, and is due to the provider in advance of care or they will be charged a late fee of \$25 per late payment as set forth in the Handbook. By signing this Agreement, Parent(s)/Guardian(s) agree to pay a non-refundable Registration Fee, the first month's tuition, and agree to all fees and billing procedures as set forth in the Handbook which they acknowledge receiving today by signing this Agreement. If a personal check is returned due to a lack of funds, the Parent/Guardian may be charged a \$25 returned check fee. If a check is returned more than one time, only cash or money orders will be accepted as payment. Additionally, failure to pay in accordance with the terms of the Handbook policies may result in immediate termination of this Agreement.

The provider will not be open for business on Holidays and during school cancellations/closures as set forth in the Handbook. Parents/Guardians will still be expected to pay the regular monthly tuition during their scheduled vacations. If a child is ill or will be absent from school, the provider must be given reasonable notice.

This Agreement may only be terminated by the Parent(s)/Guardian(s) or the provider in accordance with the termination policies set forth in the Handbook. If Ponderosa Montessori School chooses not to enforce any portion of the Agreement, it does not give up their right to enforce any other portion of the Agreement. This Agreement may be revised at any time by Ponderosa Montessori School as necessary. The terms of this Agreement are governed by the policies of Ponderosa Montessori School as set forth in the Handbook.

The signatures below indicate agreement with this Agreement and with the written policies of the provider set forth in the Handbook. Ponderosa Montessori School may change policies as needed. Both custodial parents or legal guardians must sign this Agreement and agree that both will act as guarantor to the Agreement and agree to be bound by all financial terms.

Signature (all Guardians): _____ Print Name: _____ Date: _____

Signature (all Guardians): _____ Print Name: _____ Date: _____

Ponderosa Montessori School welcomes all people. Ponderosa Montessori School is committed to a policy against discrimination and admits students of any race, color, religion, gender, family structure, disability, national and ethnic origin.

Revised: 1/21/2020