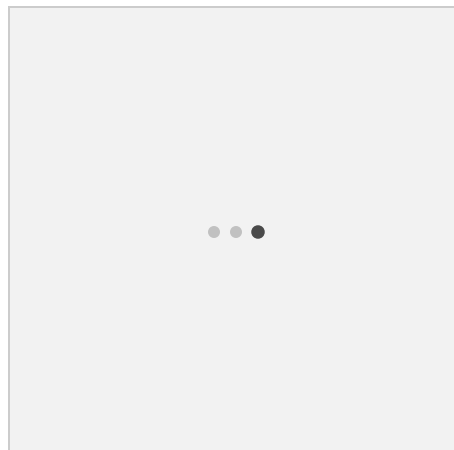


MADEIRA PRESCHOOL 2019-2020 REGISTRATION FORM

CHECK ALL THAT APPLY:

- Child currently enrolled
- Sibling of a currently enrolled child
- Child of Madeira City Schools employee
- Child previous enrolled in Madeira Preschool
- Child new to Madeira Preschool, Madeira Resident
- Out of district resident returning family



I. Registration Information – Please print

Child's full name _____

Child's first name for classroom use _____

Child's birth date (month, date, year) _____ Male Female

Child's Age August 31, 2019: _____ years _____ month(s)

Child's Place of Birth (City, State, Country) _____

Check type of acceptable birth documentation below **(submit copy with registration):**

Birth Certificate Passport Attested transcript of certificate of birth Attested transcript of hospital record

Parent / Guardian Name _____

Mother's Maiden Name _____

Address _____ Zip Code _____

Home Phone _____ Cell Phone _____

Email _____

Parent / Guardian Name _____

Address (if different than above) _____ Zip Code _____

Home Phone _____ Cell Phone _____

Email _____

LEGAL GUARDIANSHIP:

Are you the natural / adoptive parent (s) of the child? Yes No

If no, what is your relationship to the child? _____

STATUS OF NATURAL PARENTS:

Married Divorced Widowed Separated Single /Never Married

If divorced, who has legal custody? Mother Father Shared Parenting

CITIZENSHIP:

US Citizen Non-US Citizen / Immigrant*

(*Immigrant students are those who: 1. Are age 3-21; 2. Were not born in the United States; 3. Have not attended one or more schools in any one or more of the states for more than three academic years.

ETHNIC STATUS:

Hispanic or Latino Not Hispanic or Latino

RACE:

American Indian/Alaskan Native Asian Black/Non-Hispanic Hispanic
 Pacific Islander White/Non-Hispanic

II. PUPIL PROFILE

1. What is the primary language spoken in your home? _____

2. What language did your child speak when he/she first learned to talk? _____

3. Has your child ever qualified for Early Intervention services? Yes No
If yes, what were your child's needs?

4. If dismissed from services, when? _____

5. Are there any allergies, history of ear infections or health/medical concerns for your child? Yes No
If yes, explain: _____

6. Will your child need to have medication administered during school hours?
If yes, explain _____

7. Do you have any developmental concerns at this time?

8. Does your child currently attend any other programs or clinics? Yes No
If yes, where: _____

III. PROGRAM OPTIONS

*A \$25 REGISTRATION FEE (Non-refundable) is required at the time of registration.
Make checks payable to Madeira City Schools.*

Registration Policy

Children must be 3 years old by August 31 to enroll in preschool. Registration placements will be made in this order: currently enrolled preschool students, younger siblings, staff children, past Madeira **Preschool** families, and families who are new to the preschool. When there is a waiting list within the programs, placements will be made based on the date and time stamp that registration forms were received.

Registration Instructions

Please indicate first, second and third choice (by using 1, 2, 3) beside your class preference. We cannot guarantee your first choice or teacher requests.

Half-Day Morning 9:00-11:30

___ 4 days; MTWR \$296/month

Half-Day Afternoon 1:00 – 3:30

___ 4 day; MTWR \$296/month

Full-Day Program 9:00 – 3:30

___ 5 day; MTWRF \$893/month

___ 4 day; MTWR or TWRF \$714/month

In addition to the preschool options you may choose to enroll your child in the Before School Preschool programs. Availability of program hours will depend upon enrollment. Please check the days and hours of extended care that you want.

	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>
<i>8-9 a.m.</i>					

After school programming from 3:30-6:00 will be available at Madeira Elementary with Champions. Children will be transported by school bus to the Elementary School. To enroll your child please go to www.DiscoverChampions.com

IV. Terms and Conditions of Enrollment

1. PROGRAM AGREEMENT

- Madeira Preschool follows the Madeira Elementary School calendar. The first week of school is reserved for home visits and the second week is reserved as a transition week for children. All children will be in session from August 22 – May 23.
- Applications will be processed according to priority and the time/date stamp on the Registration Form. Parents will receive a confirmation of enrollment by email.

2. MEDICAL AGREEMENT

- All required medical forms: Birth Certificate, Health History, Physician's Report, Immunization Record, Emergency Medical Authorization, and Medication Permission, must be turned in prior to the first day of school. Forms are available below, or on-line by going to the Madeira Elementary School website or clicking [Required Preschool Forms](#).
- Any known medical condition will be disclosed on this application.
- A doctor must sign a Medication Permission form before staff members can administer medication.
- Children whose medical forms have expired (or are incomplete) will be excluded from the program until forms are brought up-to-date per Ohio Department of Education Licensing Rules.

3. FINANCIAL AGREEMENT

- Tuition is divided into 9 monthly payments. The first tuition is due May 1, 2018 OR at the time of registration after May 1. Subsequent payments are due the first day of every month, September 2018 – April 2019. Payments may be made on-line or by check that is mailed or hand delivered to the Madeira Board of Education Office, 7465 Loannes Drive, Cincinnati, OH 45243. Please print your child's name on the memo line of every check.
- The preschool is a tuition-supported program. Missing a tuition payment may lead to exclusion from the classroom.
- If a tuition payment is 30 DAYS LATE the school will notify the parent and their child will not be allowed to participate in the program until tuition is paid.
- No refunds will be made if the student is ill or absent from the program and no amounts will be deducted for school holidays, calamity days and professional days that occur during the course of the program.
- Parents are expected to arrive at school on time and pick their child up on time. Parents will be billed \$20 for arriving 15 minutes past pick up time and \$1 a minute beyond that time after the 2nd late pick-up.

I have read and understand the above terms and conditions of enrollment. I understand first choices are not guaranteed due to size and requirements of class structure.

Parent Signature _____ Date _____

Parent Printed Name _____