



**Coral Springs  
Community Church &  
DAY SCHOOL**

# Enrollment Application

For Office Use Only  
 Class Assigned: \_\_\_\_\_  
 Schedule: 5 days 3 days 2 days  
 Dismissal: 12:30 3:30 5:30

Present Date: \_\_\_\_\_ Approximate Start Date: \_\_\_\_\_

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Address \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ Sex \_\_\_\_M \_\_\_\_F

Child lives with  both parents  mother  father  legal guardian

Natural Parents Marital Status:  married  single  separated  divorced

	Mother	Father	Stepmother	Stepfather	Guardian
Name					
Cell Phone					
Email					
Occupation					
Work Phone					

Email address for class updates  both parents  mother  father  legal guardian

Number of children in family: \_\_\_\_\_

Is either parent (or guardian) forbidden by court order from having equal access to the student or to the students records? (copy of legal custody required) \_\_\_\_\_

Alternate address for child if not the same as listed above: \_\_\_\_\_

Does your family attend church?  No  Yes

Church Name: \_\_\_\_\_

**School student last attended:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**Do you have any concerns about your child's learning?** \_\_\_\_\_

**Has your child been seen at FDLRS/Early Steps/Child Find for assessment? If yes, please explain:** \_\_\_\_\_

**Does your child have an IEP or IFSP (Individualized Family Service Plan):** \_\_\_\_\_

If yes, please provide copies prior to enrollment.

**Has your child ever been tested or recommended for testing? If yes, please explain:** \_\_\_\_\_

\*Failure to disclose students' special needs (physical, emotional or academic) can result in immediate dismissal with no refund for prepaid services.

***Please initial to indicate your support in these areas:***

- Are you willing for your child to receive training in the Bible and will you support the school in its endeavors to encourage and guide your child in applying those teaching to his/her life?
- Will you assume the responsibility for your child's preschool education by keeping in regular contact with your child's teacher?
- If the preschool administration makes a recommendation for your child to have professional development or behavioral evaluation, will you assume the responsibility to follow through using a private or a public service and report the results to the administration?
- Are you willing to support, to the best of your ability, the various activities at your child's school?
- Are you willing to support the school and its policies concerning health, attendance, safety, and classroom expectations according to the Coral Springs Community Church Day School Parent Handbook?

This application is the first step for enrollment at Coral Springs Community Church Day School. We ask you please set up a time to sit down with our Director, Stephanie Barnhouse, to discuss this application and if CSCC Day School is the best fit for your child. Please be aware that this does not guarantee admission to our school, and admission will be offered at time of meeting with Director.

## Coral Springs Community Church Day School 2020-2021 Tuition

Days		5 Days (M – F)	3 Days (M/W/F)	2 Days (Tu/Th)	
<b>12 Months - 2 Years</b>					
Half Day	7:30 -12:30 PM	\$560	\$455	\$365	
Full Day	7:30-3:30 PM	\$640	\$535	\$440	
Extended Day	7:30-5:30PM	\$690	\$570	\$490	
<b>2 Years - 4 Years</b>					
Half Day	7:30 -12:30 PM	\$540	\$440	\$350	
Full Day	7:30-3:30 PM	\$625	\$535	\$410	
No aftercare available at this time					
<b>VPK Program Rates/ *3 FREE HRS</b>					
Half Day	7:30 -12:30 PM	\$290	\$230	\$210	
Full Day	7:30-3:30 PM	\$445	\$340	\$310	
Extended Day	7:30-5:30PM	\$500	\$390	\$350	

### NOTES

**Registration Fees:**

One Non-Refundable \$150 Registration fee for School Calendar year  
 \$70 Non-Refundable Deposit for Summer

**Discounts:**

- a. 15% sibling discount (when they attend at the same time)
- b. 10% CSCC Church Member Discount

**School Holidays:**

Labor Day, Veterans Day, Thanksgiving Break, Winter Break (Christmas to New Years), Martin Luther King Day, President's Day, Maundy/Holy Thursday, Good Friday, Memorial Day, Camp Prep Day, Fourth of July, and three days in mid-August for fall classroom preparation.

**Tuition is not reduced for absences (illness or vacation) nor days closed.**

**Rates subject to annual increase**

# **Tuition Form**

1. A \$150.00 non-refundable registration fee and the first month's tuition are due at time of registration, once offered a spot by Director.

2. Tuition fees are charged in 10 equal monthly payments for the traditional school year, payable August through May, or starting from the month your child starts school. Summer camp will be 2 equal monthly payments, payable June & July. **There are no deductions in tuition because of missed days, personal vacation, school closing for holidays, or emergency closings. If you become more than 1 month behind in tuition payments, your family is subject to expulsion.**

3. Sibling discount of 15% available on tuition and a \$50 discount on sibling registration fee.

Preferred Student Schedule:

No. of days:    2 \_\_\_\_                    3 \_\_\_\_                    5 \_\_\_\_  
Dismissal:      12:30 \_\_\_\_            3:30 \_\_\_\_            5:30 \_\_\_\_            VPK only \_\_\_\_  
Monthly Tuition:    \$ \_\_\_\_\_

**Tuition is due on the 1<sup>st</sup> of each month.  
A late fee of \$40.00 will be assessed after 7 days.  
The returned check fee is \$45.00.  
After two returns, only cash or money orders will be accepted.**

**Student Name:** \_\_\_\_\_ **Classroom:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

Office Use only:		
<b>Registration Paid</b>	____ / ____ / ____	<b>T-shirt given</b> Y____ N____
<b>Check #</b> _____	<b>Cash</b> _____	<b>Amount</b> _____