

**Day School/Enrollment Form**

Secret Password \_\_\_\_\_

Child's Name \_\_\_\_\_

Birth Date \_\_\_/\_\_\_/\_\_\_

Address \_\_\_\_\_

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

City \_\_\_\_\_

Zip Code \_\_\_\_\_

Sex \_\_\_ M \_\_\_ F

E-mail Address \_\_\_\_\_

Child lives with  both parents  mother  father  legal guardian

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Marital Status  married  single  separated  divorced (copy of legal custody required)

Mother's Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

Father's Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

Guardian's Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell \_\_\_\_\_

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Allergies and/or Other Medical Information \_\_\_\_\_

In case of an emergency or illness, please list the names of 2 persons, other than parents, to be notified and who are authorized to remove child from the school.

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Pediatrician \_\_\_\_\_ Phone \_\_\_\_\_

EMERGENCY AUTHORIZATION for \_\_\_\_\_ Class \_\_\_\_\_

In case of an emergency, I authorize the personnel of Coral Springs Community Church Day school to seek and obtain whatever medical treatment and/or transportation is appropriate for the emergency situation with my child. I understand that parents and other authorized persons will be notified as soon as possible.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

# **Enrollment Form**

## ***Parental Consent***

- 1. My child will receive Christian based care and instruction at the Coral Springs Community Church Day School.**
- 2. I understand that the Coral Springs Community Church Day School is using a curriculum that will require a supply fee.**
- 3. The registration fee (non-refundable) and first month's tuition is due before child's first day in school.**
- 4. Tuition fees are charged in equal monthly payments regardless of the number of school days per month. NO SUBSTITUTION OF DAYS.**
- 5. Payment of tuition is due on the first of each month. A late fee of \$40.00 will be assessed after seven business days. A \$45.00 fee is charged for returned checks. After two returned checks, we will accept only cash or money orders for payment.**
- 6. A "Late Pick-Up" fee of \$10.00 for every 15 minutes late will be assessed after 12:30 p.m. and 3:30 p.m., giving a five-minute grace period. A late fee of \$1.00 per minute will begin promptly at the 6:00 p.m. dismissal time.**
- 7. I have chosen a schedule for my child and agree to pay the monthly tuition fees.**
- 8. I have read the Day school's Discipline, Expulsion and Illness Policies and signed the forms.**
- 9. I have completed, signed, and returned the #1 Emergency Form.**
- 10. I have completed this Enrollment Form, supplied the necessary health documents, supplied an original birth certificate of my child and a photo ID of all those allowed to remove my child from the school premises.**

**Coral Springs Community Church Day School has my permission to publish any photos taken of my child on school premises Y \_\_\_ N \_\_\_: on our website's photo album Y\_\_\_ N\_\_\_.**

**Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_**

## 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 - 18 Months</b>					
Half Day	7:00 -12:30 PM	\$570			
Full Day	7:00-3:30 PM	\$660			
Extended Day	7:00-6:00PM	\$705			
<b>18 Months - 2 Years</b>					
Half Day	7:00 -12:30 PM	\$560	\$455	\$365	
Full Day	7:00-3:30 PM	\$640	\$535	\$440	
Extended Day	7:00-6:00PM	\$690	\$570	\$490	
<b>2 Years - 4 Years</b>					
Half Day	7:00 -12:30 PM	\$540	\$440	\$350	
Full Day	7:00-3:30 PM	\$625	\$535	\$410	
Extended Day	7:00-6:00PM	\$660	\$555	\$475	
<b>VPK Program Rates/ *3 FREE HRS</b>					
Half Day	7:00 -12:30 PM	\$290	\$230	\$210	
Full Day	7:00-3:30 PM	\$445	\$340	\$310	
Extended Day	7:00-6:00PM	\$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 (two days), Winter Break (Christmas to New Years), Martin Luther King Day, President's Day, 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**

1. A \$150.00 non-refundable registration fee and the first month's tuition are due at time of registration.
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.

Student Schedule:

No. of days:    2 \_\_\_\_                    3 \_\_\_\_                    5 \_\_\_\_

Dismissal:    12:30 \_\_\_\_                    3:30 \_\_\_\_                    6:00 \_\_\_\_                    VPK only \_\_\_\_

Monthly Tuition:    \$ \_\_\_\_\_

Registration Paid    \_\_\_\_ / \_\_\_\_ / \_\_\_\_                    T-shirt given    Y\_\_ N\_\_

**Check #** \_\_\_\_\_    **Cash** \_\_\_\_\_

**Amount** \_\_\_\_\_

**Tuition is due on the 1<sup>st</sup> of each month.**  
**A late fee of \$40.00 will be assessed after 7 business 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:** \_\_\_\_\_