



Chapel School
 3 Lutheran Dr
 Nashua, NH 03063
 (603) 882-6142 x140
 Direct Line (603) 589-0545
 www.chapelschool.org
 director@chapelschool.org

REGISTRATION FOR THE 2018-2019 SCHOOL YEAR

Student's Information

First Name: _____ Last Name: _____

Date of Birth: _____ Boy Girl Nickname: _____

Preferred name for classroom labels/name tags
 and for your child to learn to recognize and write: First Name or Nickname

Home Address: Street: _____ Apt: _____
 City: _____ State: _____ Zip Code: _____

Food Allergies: None Yes (please list) _____

Parent or Guardian's Information

Parent/Guardian Mrs. Ms. Miss Mr.

Parent/Guardian Mrs. Ms. Miss Mr.

First Name: _____ First Name: _____

Last Name: _____ Last Name: _____

Address: _____ Address: _____
 Same as above Same as above

Home Phone: _____ Home Phone: _____

Cell Phone: _____ Cell Phone: _____

Cell Phone Provider: _____ Cell Phone Provider: _____

Email to use for eNews and communication: _____

Are you a member of Christ the King Church? Yes \$10 discount/month No

Office Use Only:

Pandas	Koalas	Puppies	Froggies	Bears	Monkeys	Hummingbirds	Eagles
Early Drop Off	Late Pick Up	Lettercize	Literacy	Fri AM 4's	Fireflies	Lunch Bunch	

Please see reverse side for class selection.

Chapel School Class Selection

All children must be 2-5 years old as of Sept 30, 2018 to enroll.

Instructions & Information:

1. Read the enclosed **Class Descriptions** and **Tuition Rate** information for age and potty training requirements, as well as schedules and fees.
 2. Choose your 1st and 2nd choices for class options.
 3. Select any Add-On choices.
- The yearly tuition is divided into 9 monthly payments due the 1st of the month from September 1st through April 1st. The May payment for regular tuition (not Add-On programs) is due in advance, at time of registration (due May 1, 2018 for current families).
 - The registration fee is \$75 per student with a maximum of \$150 per family.
 - There is a \$10 monthly discount for CTK members, Active Military, and for 2nd, 3rd enrolled siblings.

Select Classes: Choose 1st & 2nd Choices. For 5 days per week, select the 2 classes as 1st choice.

Select 1 st Class Choice(s):	Select 2 nd Class Choice(s):
___ 2's - Precious Pandas	___ 2's - Precious Pandas
___ 2's - Kind Koalas	___ 2's - Kind Koalas
___ 3's - Focused Froggies	___ 3's - Focused Froggies
___ 3's - Peaceful Puppies	___ 3's - Peaceful Puppies
___ 3's - Balanced Bears	___ 3's - Balanced Bears
___ 4's - Harmonious Hummingbirds ___ Add Friday AM	___ 4's - Harmonious Hummingbirds ___ Add Friday AM
___ 4's - Mindful Monkeys ___ Add Friday AM	___ 4's - Mindful Monkeys ___ Add Friday AM
___ Kindergarten - Eager Eagles AM	
Choose Add-On Options:	
Early Drop Off – 8:30-9:00	___ Mon, ___ Tues, ___ Wed, ___ Thurs, ___ Fri
Late Pick Up – 3:00-3:30	___ Mon, ___ Tues, ___ Wed, ___ Thurs, ___ Fri
Lunch Bunch	___ Mon, ___ Tues, ___ Wed, ___ Thurs, ___ Fri
Fireflies Extended Day	___ Mon, ___ Tues, ___ Wed, ___ Thurs, ___ Fri
Lettercize	___ Mon PM
4's Friday AM	___ Fri AM
Literacy	___ Fri PM



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FINANCIAL AGREEMENT

I, _____ hereby enroll my child,
 _____, at Chapel School and **regardless of my child's absences**, agree to pay the rate of:

- \$_____ per month for Class
- \$_____ per month for Early Drop Off/Late Pick Up *(if applicable)*
- \$_____ per month Lunch Bunch *(if applicable)*
- \$_____ per month for Fireflies Extended Day *(if applicable)*
- \$_____ per month for Lettercize *(if applicable)*
- \$_____ per month for Friday AM 4's *(if applicable)*
- \$_____ per month for Literacy *(if applicable)*
- \$_____ per month Sibling, CTK, Active Military \$10 discount
-
- \$_____ total per month

I understand that the May tuition for the regular class schedule (which I am paying in advance) acts as a security deposit for the school and that I will forfeit said payment should I decide to withdraw my child without giving two weeks written notice as is required by school policy. I understand that the May tuition for Add On Options will be due on May 1, 2019.

I understand and agree with the tuition procedures as listed below:

- All monthly tuition checks are made payable to **Chapel School** and mailed or delivered to the tuition mailbox at the school.
- Tuition payments are due on the first (1st) day of each month; prompt payments are greatly appreciated.
- A late fee of \$15 must be included with payments not received by the fifth (5th) day of the month.
- The school reserves the right to dismiss a student whose tuition is two months in arrears. However, every effort will be made to work with those experiencing financial difficulty. Please let us know so we might help in any way we can.
- No refund will be given for withdrawal without 2 weeks written notice.

 Parent's Signature

 Date



NOTE TO PARENT/S or GUARDIAN/S:

The licensing authority for this program is the Bureau of Licensing and Certification, Child Care Licensing Unit. Child care programs are required to post a copy of the statement of findings and corrective action plan for the most recent visit in a location which is accessible to parents, and must maintain copies of the statement of findings and corrective action plan for the preceding visit and make them available for parents to review upon request. Statements of findings and corrective action plans are also available on-line at <http://childcaresearch.dhhs.nh.gov> or by calling the unit at 1-800-852- 3345, extension 9025 or 603-271-9025.

During licensing, monitoring, and complaint investigation visits to licensed programs the department shall speak with children regarding the care they receive at the program, if in the judgment of the licensing coordinator the children's response would be valuable in determining compliance with licensing rules. Licensing staff are experienced in working with children and trained to interview in a manner that is respectful and non-leading. However, if you do not want your child interviewed, or if you wish to be informed prior to your child being interviewed you must give the family child care provider, center director, site director or designee, and update annually, a signed dated statement indicating your preference.

For more information about Child Care Licensing please visit our website at:
<http://www.dhhs.state.nh.us/oos/cclu/index.htm>

Registration Instructions:

1. Complete Registration Form
2. Provide current health form and immunization record, unless already on file for current students. These forms need to be updated each year after child's annual physical.
3. Pay \$75 registration fee (maximum of \$150 per family)
4. May 2019 Advance Tuition Payment (not required for Add On Options) is due at time of registration for new families. Current families pay the May 2019 tuition on May 1, 2018.