



Child's Name \_\_\_\_\_ Birth date \_\_\_\_\_ Age on August 1, 2023 \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
 Parent's Name \_\_\_\_\_ E-mail \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

**Non-refundable Fees: \$75 Registration Fee \$75 Supply Fee (due yearly)**

Plans (Circle the fee of the plan you are registering for)	Fees (Weekly)	Monthly Fees (4 weeks)
Preschool Only (8:30-3:30) <i>student cannot be signed in before 8:25 and must be picked up 3:35</i>	\$135.00 a week	\$540.00 a month
Preschool plus Kids Club Morning Care Plan (6:30-3:30)	\$155.00 a week	\$620.00 a month
Preschool plus Kids Club Afternoon Care Plan (8:30-6:00)	\$175.00 a week	\$700.00 a month
Preschool plus Kids Club Morning and Afternoon Care (6:30-6:00)	\$185.00 a week	\$740.00 a month
Drop In morning care (any time before 8:25 am)	\$25.00 a day	-----
Drop in (early release, if not currently enrolled in the aftercare program)	\$25.00 a day	-----
Drop In Aftercare (released at 3:30, if not currently enrolled in the aftercare program)	\$20.00 a day	-----

\_\_\_\_ (Initial) I have read, understand, and agree to adhere to the parent handbook and payment policies.  
 \_\_\_\_ (Initial) I understand if my tuition payment is not paid prior to service my child cannot attend, and I may lose my space.  
 \_\_\_\_ (Initial) **NO CREDIT** will be given for days that are not used. Accounts cannot be placed on hold.  
 \_\_\_\_ (Initial) I understand that if my child is registered for the Preschool only plan and I arrive early (before 8:25AM) I will be billed an additional \$25.00 for that day. If I pick up late (after 3:35PM) I will be billed an additional \$25.00 for that day or \$50.00 if it's more than one day.  
 \_\_\_\_ (initial) I understand I am responsible for my child's lunches. Your child may bring their own sack lunch, or purchase one. School lunches are \$2.50 a meal. Qualified families may apply for free or reduced meals.  
 \_\_\_\_ (Initial) I give permission for my child to be photographed or videotaped in a school-related setting, including at public programs provided by schools, and have the pictures and/or videotapes reproduced in the media and/or school-related publications such as, but not limited to, newsletters, brochures, and school/district websites.  
 \_\_\_\_ (Initial) **A TWO-WEEK WRITTEN NOTICE IS REQUIRED TO STOP OR DECREASE SERVICES.**  
 \_\_\_\_ (Initial) I understand my child must be toilet trained to attend these programs.  
 \_\_\_\_ (Initial) **I understand by attending the Vista Del Sur preschool this does not guarantee placement at Vista Del Sur Accelerated Academy for the school age years (kinder-8<sup>th</sup> grade).**  
 \_\_\_\_ (Initial) I understand my child can't attend unless he/she is in good health, and has no fever and no current health issues that make it unsafe for my child to participate in the preschool program.  
 \_\_\_\_ (Initial) This agreement is subject to change in order to meet the needs of Laveen School District.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

**Registration will not be accepted without the following documentation attached:**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Completed Registration Form with signature | <input type="checkbox"/> ADHS Emergency Information Form | <input type="checkbox"/> Special Diet Form (if applicable) |
| <input type="checkbox"/> New Student Enrollment Form Part 1 & 2     | <input type="checkbox"/> Immunization Record             | <input type="checkbox"/> IEP (required if applicable)      |
| <input type="checkbox"/> Official Birth Certificate                 | <input type="checkbox"/> Parent/ Guardian's state ID     | <input type="checkbox"/> Court Papers (if applicable)      |

**If you wish to change your original registration you must complete a new registration form.**

All changes must be done in person two weeks prior to the effective date at the Kids Club Office located at Desert Meadows School.  
 New Registration form submitted on: \_\_\_\_\_ Change effective date: \_\_\_\_\_ \$20.00 fee on 3<sup>rd</sup> registration change.

**DES Authorized Services**

\_\_\_\_ (Initial) I understand if my DES services stop I am subject to the same fees as cash paying participants.  
 \_\_\_\_ (initial) I understand if I fail to follow DES rules regarding times and signatures on the attendance sheet I will be responsible for that day's tuition fees.  
 \_\_\_\_ (initial) I understand I am responsible to pay any charges DES does not cover including weekly fees.

**DUE AT THE TIME OF REGISTRATION**

\$ \_\_\_\_\_ Registration fee (non-refundable)      **Start Day:** \_\_\_\_\_ This agreement will end on May 22, 2024  
 \$ \_\_\_\_\_ Supply Fee (non-refundable)  
 \$ \_\_\_\_\_ First week payment (non-refundable if space is forfeited)  
 \$ \_\_\_\_\_ Total due today

Taken by \_\_\_\_\_ Processed by \_\_\_\_\_ Original Site  
 DES auth received \_\_\_\_\_ Sch emailed \_\_\_\_\_