



**AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION:**

*In the event I cannot be reached to make arrangements for emergency medical attention, I authorize the facility director or person in charge to take my child to:*

Name of Physician	Address	Phone number
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I give consent for necessary emergency treatment when my child is in the care of a physician and/or hospital/clinic:

Signature- parent or legal guardian	Date
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**Maternal Grandparent Information**

Name:	Address:
	Email:

**Paternal Grandparent Information**

Name:	Address:
	Email:

**Terms and Conditions of Enrollment**

1. This contract, signed by the child's parent(s) or other legally responsible adult(s) and accompanied by a \$100.00 non-refundable registration fee, as well as all other paperwork required for enrollment as identified in the Alpine Montessori Parent Handbook for the school year, must be received and accepted by the Alpine Montessori School. The Alpine Montessori School accepts the contract only when the Alpine Montessori School's representative signs the contract. The Alpine Montessori School is under no obligation to hold or reserve a place for any student until the school accepts this contract. The original copy of the completed contract will be maintained in the custody of the Alpine Montessori School.
2. By signing this contract, the undersigned parties acknowledge and agree to be bound by all Alpine Montessori School policies and procedures as described in the Parent Handbook for the school year. The undersigned parties acknowledge and agree that the failure to abide by the Alpine Montessori School policies and procedures as described in the Parent Handbook for the school year can result in the suspension or dismissal of the child from the Alpine Montessori School. The parties acknowledge and agree that the Alpine Montessori School retains the right to suspend or dismiss a child from the school in cases of serious disruption to the learning environment or in any case that may represent a danger to the health, safety or well-being of the Alpine Montessori School students or staff.
3. By signing this contract, the child's parent(s) or other legally responsible adult(s) agree(s) to pay tuition to the Alpine Montessori School according to the following tuition schedule, based on a 10 month school year.

## ACADEMIC DAY

8:00 AM – 3:00 PM

\$6000/yr.

or

\$3000/semester

or

\$1500/bi-semester

or

\$600/mo.

4. Tuition must be paid in advance, or in semester, bi-semester, or monthly installments over 10 months according to the previous schedule. *By signing this contract, the child's parent(s) or other legally responsible adult(s) agree(s) to pay the bill no later than the first of each month and also agree(s) to pay a \$25.00 late payment fee in the event the payment is received by the Alpine Montessori School after the fifth of the month. There will also be a \$5.00 per day late fee added to all tuition payments not received by the tenth of the month.* The parties agree and acknowledge that no refunds will be given due to absences or vacations.
5. By signing this contract, the child's parent(s) or other legally responsible adult(s) agree(s) to pay a \$250 supply and snack fee, and a \$50 standardized testing fee for the school year.
6. By signing this contract, the child's parent(s) or other legally responsible adult(s) *agrees to pay \$5.00 per each 15 minutes the child stays at the Alpine Montessori School past the contracted times* referenced in paragraph 3 of the Terms and Conditions of Enrollment and *additionally agree(s) to pay \$3 per every minute the child stays at the Alpine Montessori School after 5:30 PM.*
7. By signing this contract, the child's parent(s) or other legally responsible adult(s) agree(s) that in the event a child is withdrawn from the Alpine Montessori School, *written notice of the withdrawal must be given to the Alpine Montessori School at least four weeks in advance of the date a child will be withdrawn from the school.* The parties acknowledge and agree that the notice of withdrawal must be given in writing to the Executive Director or Administrator of the Alpine Montessori School and must state the date on which the child will be withdrawn from the school. The parties agree that such written notice is not effective until it is actually received. By signing this contract, the child's parent(s) or other legally responsible adult(s) *agree(s) to pay a \$100 withdrawal fee* in the event written notice of the child's withdrawal is not given at least four weeks in advance of the date the child is withdrawn in compliance with this paragraph.
8. By signing this contract the child's parent(s) or other legally responsible adult(s) agree(s) that in the event the Alpine Montessori School undertakes legal action to collect on any monies owed pursuant to the terms of this contract, including without limitation any unpaid fees, late payment fees, fees accrued for children who stay past contracted times, or withdrawal fees, the parent(s) or other legally responsible adult(s) will be responsible and liable for any attorney's fees, court costs, or other costs reasonably expended by the Alpine Montessori School in order to collect monies owed. By signing this contract, the child's parent(s) or legally responsible adult(s) agree(s) that the Alpine Montessori School reserves the right to refuse a contract, or to terminate a contract, of any student of which the School deems that it would be in the best interest of the School refuse or terminate such a contract. Such decisions are completely within the discretion of the School.
9. The parties agree that this enrollment contract constitutes the enrollment contract in its entirety.

Please circle your payment method:

**Pre-paid**      **Semester**      **Bi-semester**      **Monthly**

Mother's or Legally Responsible Adult's Signature:

\_\_\_\_\_ Date \_\_\_\_\_

Father's or Other Legally Responsible Adult's Signature:

\_\_\_\_\_ Date \_\_\_\_\_

Alpine Montessori School's Representative's Signature:

\_\_\_\_\_ Date \_\_\_\_\_