



STILLWATER CHRISTIAN SCHOOL

PRE-SCHOOL APPLICATION 2011/2012

255 FFA Drive, Kalispell, MT 59901
(406) 752-4006 (406) 755-4061 Fax

STUDENT AND FAMILY INFORMATION

Child's Name _____ Goes by _____ Male
First Middle Last Female

Child's Address _____ Home Phone _____
Street City State Zip

Birth date ___/___/___ Current Age _____ Does child dress independently? Yes No

Any special needs of child (physical health or development) Yes, please comment below No

Are there any problems with your child's speech? Yes, please comment below No

Does your child play well with other children? Yes No, please comment below

Comments and concerns you have about your child's behavior: _____

Parents are: *Married* *Re-married* *Divorced* *Separated* *Widow(er)*

Father's Cell Phone _____ Mother's Cell Phone _____

Father's Name _____ Place of Work _____ Phone _____

Mother's Name _____ Place of Work _____ Phone _____

Family e-mail address _____ Family Church _____

☞ PRESCHOOL SESSION DESIRED (*Check one box*)

- | | | | |
|--------------------------------------|------------------|----------------|-------------|
| <input type="checkbox"/> 5 full days | Mon-Fri | 8:10am-3:00pm | \$4600/year |
| <input type="checkbox"/> 5 half days | Mon-Fri | 8:10am-11:30am | \$3600/year |
| <input type="checkbox"/> 3 full days | Tues, Wed, Thurs | 8:10am-3:00pm | \$2800/year |
| <input type="checkbox"/> 3 half days | Tues, Wed, Thurs | 8:10am-11:30am | \$2200/year |
| <input type="checkbox"/> ___ days | _____ | | \$___/year |

☞ \$250 NONREFUNDABLE REGISTRATION FEE

In the event that an emergency arises that keeps you from picking up your child by 5:45pm you will be charged \$5.00 per 15 minutes late. Repeated late pick-ups may result in dismissal of your child.

All tuition payments will be administered through FACTS Tuition Management. Enrolled families will be responsible for setting up an account with FACTS and choosing the payment plan and payment due date that best fits their individual needs.

Click on FACTS link on our stillwaterchristianschool.org website to sign-up.

Payment options available through FACTS:

First payment must be scheduled for no later than Sept. 1st and completed by June 25th

- | | |
|---|---|
| ◆ One-time payment in full | ◆ Quarterly payments (Aug., Nov., Feb., May) |
| ◆ Monthly payments
(1 st , 10 th , 15 th , 25 th) | ◆ Semi-monthly payments
(1 st & 15 th or 10 th & 25 th) |

POLICIES AND CONDITIONS

1. Students must be three years of age before June 1. The director may cap the number of three year old students accepted in the program to maintain a balance of enrollment.
2. All students must be completely potty-trained and independent in their personal hygiene.
3. TUITION
 - The first month's tuition payment is non-refundable and must be scheduled for withdrawal no later than September 1st.
 - All tuition payments must be set-up through FACTS Tuition Management Services.
 - All accounts must be current before a family is accepted for re-registration.
 - Students will be allowed to begin a new year after all previous years' obligations are met.
 - I agree to pay a nonrefundable registration fee of \$250.00 at the time of enrollment.
4. LUNCH
 - Hot lunch may be purchased daily for a special preschool price of \$2.00 per lunch, including milk or juice. Student may choose to bring a lunch from home.
5. If parents have a concern or are dissatisfied, they will seek to resolve the issue with the person(s) directly. Parents agree to not gossip about teachers, staff, or other school families, but to follow the principle of Matthew 18:15-17.
6. The school reserves the right to ask a family to withdraw from the school if, in the opinion of the board, the family is unable to support the policies and practices of the school or has lost trust in the school and its leadership.
7. SCS admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to student at the school. It does not discriminate on the basis of race, color, national and ethnic origin in the administration of its educational policies, admission policy, and other school-administered programs.

I have read, understand and agree to support and fulfill SCS's policies and conditions stated above. I agree to fulfill my obligations to the school as outlined on this sheet.

Parent: _____ Date: _____

Parent: _____ Date: _____

Date Received: _____ *Registration Fee Paid \$* _____ *Ck #* _____