

Juneau Montessori School

750 St. Ann's Ave., Douglas, AK 99824

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An Association Montessori Internationale (AMI) Recognized School

Summer Camp Registration & Tuition Agreement

I (We) _____, the undersigned, being the parent(s) or guardian(s) or legal custodian(s) of the minor child _____, in consideration of the acceptance of said child into the Summer Camp at the Juneau Montessori School (JMS) do hereby make the following agreements, representations, and promises:

1. I (We) will be solely responsible for the payment of tuition and other fees for whatever period of time my child is enrolled. I (We) further agree that tuition payments will be made as outlined in the schedule below (item#3).
2. I (We) understand that tuition payments are not for an hourly or daily service, but for participation of my child in the specific two week sessions of the summer camp. The payment is not affected by designated holidays, emergency closures, illness, vacations or other absences.
3. Payment Details
 - ❖ Please select applicable Two Week Summer camp session:
 - Session I (June 5 to June 16, 2017): _____
 - Session II (June 19 to June 30, 2017): _____
 - Session III (July 3 to July 14, 2017): _____
 - Session IV (July 17 to July 28, 2017): _____
 - ❖ Please select desired daily schedule. The tuition rates below are per 2 week session:
 - School Day; 8:00 am – 3:30 pm: _____
 - Extended Day; 8:00 am – 5:30 pm: _____

I (we) understand that the payment is due before the beginning of each two week session. Tuition breakdown is 255.00 Per week

Sessions	8:30 – 3:30	8:30 – 5:30	Tuition Amount
Session I – The Beach	\$510.00	\$575.00	
Session II – The Forest	\$510.00	\$575.00	
Session III – The Alpine	\$510.00	\$575.00	
Session IV – The Town	\$510.00	\$575.00	
		Total	

4. If, for any reason, I (We) must withdraw my (our) child from a session prior to its completion, I understand that the tuition **will not** be reimbursed after the first day of attendance.
5. I (We) understand that JMS must have correct contact information at all times so I (we) can be reached promptly when needed. I (We) therefore promise to notify the school immediately of any changes in the information stated on the orange emergency card.
6. I (We) understand that JMS must have current, up to date, immunization records. This information will be provided to JMS at least 1 week prior to the beginning of the enrolled session. Enrollment in the program will not be confirmed until compliance with the State immunization requirements is ensured.
7. I (We) understand that the school may experience Emergency closures in the event of severe weather conditions or natural disasters making it unsafe for children and/or staff to be in the school. JMS will make every effort to notify parents in a timely manner of such a closure.
8. The school will also close if the building is without heat, water, or electricity for any length of time resulting in health emergency necessitating closure. JMS will make every effort to notify parents in a timely manner of such a closure.
9. **Health & Safety.** I (We) will keep JMS informed about health issues, medical conditions, injuries and infectious or communicable illness such as chicken pox, strep throat, lice, etc. affecting my child. I (We) understand that a child with a serious or contagious illness will not be accepted into school. If my (our) child is too ill to remain in school or becomes ill at school, I (We) will pick up my child, or arrange for someone to do so, within 30 minutes of being notified by JMS.
10. I (We) will provide written permission to administer any medications to my child. I (We) understand that all medications, prescription or non-prescription, must be in the original container with the child's name and written instructions for administering the medication.
11. I (We) understand JMS reserves the right to dis-enroll a child when it is deemed by the Lead Guide and the Executive Director that to do so would be in the best interest of the school and/or the child. Dismissal may be for reasons such as serious, unresolved behavior problems:

JMS admits students of any sex, race, color, religion, political beliefs, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school.

Signed: _____ SSN: _____ Date: _____
 (Parent/Legal Guardian)

Signed: _____ SSN: _____ Date: _____
 (Parent/Legal Guardian)

Juneau Montessori School
Waiver of Liability/Field Trip Permission/School Directory Release/Photo Release

Student Name _____ Birth Date _____

Mailing Address _____

First Parent/Guardian _____ Home Phone _____ Work Phone _____

Second Parent/Guardian _____ Home Phone _____ Work Phone _____

Waiver of Liability

I am aware that children, due to their normal range of activity, are prone to accidents and at risk of injury. I understand that JMS strives to maintain clean and safe classroom environments and school premises and that the teachers and support staff give children grace and courtesy lessons to encourage safe and responsible behavior, which are an integral part of the Montessori curriculum.

I hereby waive and release any and all rights and claims for damages I may have against JMS, staff, or other agents of the school as well as the owners of any premises leased or rented by JMS, for any and all losses, injuries or accidents involving my child or myself while participating in school activities in or away from the school premises; including, without limitation, any injury or accident as a result of my child leaving the supervision of any of the school's agents, unless such damages are caused by the negligent acts or omissions or by the willful misconduct of JMS, staff, or other agents.

Parent/Guardian Signature Date

Parent/Guardian Signature Date

FIELD TRIP PERMISSION

(I/We) give permission for _____ to go on regular field trips involving:

- Walks in the neighborhood
- Nature walks on nearby beaches, side roads, and trails
- Open or organized gym

(I/We) understand that for any other field trips away from school involving car or bus transportation and activities of moderate risk (swimming, boating, etc.) I/We will approve our child's participation separately from this document. (I/We) understand that our child will not be involved in any high-risk activities. This approval is for the duration of our child's enrollment at JMS and may be revoked or revised in writing by both of us at any time.

Parent/Guardian Signature Date

Parent/Guardian Signature Date

Note: For joint custody cases, **both** parent/guardian signatures are required.

PHOTO RELEASE

____ I give permission to JMS to take and use photographs of my child for promotional or fundraising materials and events.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

Juneau Montessori School
Agreement of Parental Responsibilities

1. I/ we agree to remain well informed throughout the two week summer camp sessions and read all the information published and/or furnished electronically by the Juneau Montessori School (JMS) and inform JMS staff of the best way to provide me/us with school news and information.
2. I/ we agree to promptly submit required paperwork as requested by the administrative offices or classroom teachers.
3. I/ we agree to provide updated information as needed on emergency cards and immunization records.
4. I/ we agree to read any and all information provided by JMS regarding policies, fees, and financial requirements and agree to request further information or clarification when needed.
5. I/ we agree to read and understand all financial arrangements made to and by JMS and to keep a copy of all arrangements and receipts.
6. I/ we agree to meet financial obligation to JMS promptly.

Name of Child Enrolled in JMS

Name of Parent/ Guardian Date

Name of Parent/ Guardian Date

Note: In case of joint custody, both parents' or guardians' signatures are required

ARE WE READY FOR THE FIRST DAY OF THE SUMMER CAMP?

- _____ Completed Emergency Card
- _____ Up-to-date immunization records
- _____ Full Payment for the Summer session/s
- _____ Change of clothing for the day (t-shirt, pants, underwear, and socks) clearly marked with child's name (to be replenished every day if needed)
- _____ Appropriate outerwear for outside play: rain coat, rain pants & rubber boots .
- _____ LUNCH! A low-sugar lunch & beverage. Please no treats, cookies, soda, juice boxes/bags or candy. We will have outdoor, picnic-style lunch whenever possible. Please keep food simple to unpack, eat, and clean up.

IT IS ABSOLUTELY CRITICAL TO SIGN YOUR CHILD IN AND OUT, EVERYDAY, ON THE ATTENDANCE LOG.

PLEASE USE THE NOTE PAD NEAR THE ATTENDANCE LOG TO LEAVE NOTES IF THE STAFF IS UNAVAILABLE TO TALK TO YOU DURING DROP OFF.