



REGISTRATION FORM

PLEASE PRINT

CHILD'S INFORMATION		
Child's Name:	Date of Birth:	Sex: ☐ M ☐ F
Address:		Contact Phone #
Chronic Physical Problems / Pertinent Developmental Information / Special Accommodations Needed:		
Start Date:	Date of Withdrawal Notice	Last Date of Attendance
Program: ☐ 3 Day ☐ 5 Day ☐ Half Day ☐ Full Day ☐ Before Care ☐ After Care		
PARENT(S) / GUARDIAN(S) INFORMATION		
Father:	Email:	Cell Phone:
Address:		Home Phone:
Employer:		Business Phone:
Mother:	Email:	Cell Phone:
Address:		Home Phone:
Employer:		Business Phone:
Person(s) or Agency with Legal Custody of the Child:		Phone:
EMERGENCY INFORMATION		
Allergies and/or Intolerance to Food, Medications, etc:		
Action(s) to take in an emergency:		
Child's Physician	Address:	Phone:
Emergency Contact #1:	Address:	Phone:
Emergency Contact #2:	Address:	Phone:

PERSON(S) AUTHORIZED TO PICK UP THE CHILD

Person(s) authorized to pick up the child:

Person(s) NOT authorized to pick up the child*

*Appropriate paperwork, such as custody papers, shall be attached if a parent is not allowed to pick up the child.

NOTE: Section 22.1-4.3 of the *Code of Virginia* states that unless a court order has been issued to the contrary, the noncustodial parent of a student enrolled in a public school or day care center must be included, upon the request of such noncustodial parent, as an emergency contact for events occurring during school or day care activities.

OFFICE USE ONLY:

If proof of identity is required a copy is not kept, please fill out the following:

PROOF OF IDENTITY VERIFICATION

Place of birth:

Birth Date:

Birth Certificate Number:

Date Issued:

Other form of proof:

Date Document Viewed:

Person Viewing Document:

Date of Notification of Local Law Enforcement Agency (when required proof of identity is not provided):

Date: _____

Proof of the child's identity and age may include a certified copy of the child's birth certificate, birth registration card, notification of birth (hospital, physician or midwife record), passport, copy of the placement agreement or other proof of the child's identity from a child placing agency (foster care and adoption agencies), record from a public school in Virginia, certification by a principal or his designee of a public school in the U. S. that a certified copy of the child's birth record was previously presented or copy of the entrustment agreement conferring temporary legal custody of a child to an independent foster parent. Viewing the child's proof of identity is not necessary when the child attends a public school in Virginia and the center assumes responsibility for the child directly from the school (i.e., after school program) or the center transfers responsibility of the child directly to the school (i.e., before school program). While programs are not required to keep the proof of the child's identity, documentation of viewing this information must be maintained for each child.

Section 63.2-1809 of the Code of Virginia states that the proof of identity, if reproduced or retained by the child day program or both, shall be destroyed upon the conclusion of the requisite period of retention. The procedures for the disposal, physical destruction or other disposition of the proof of identity containing social security numbers shall include all reasonable steps to destroy such documents by (i) shredding, (ii) erasing, or (iii) otherwise modifying the social security numbers in those records to make them unreadable or indecipherable by any means.

OVERVIEW

- River Room Montessori is a non-denominational Christian school that provides a unique, Christian, Montessori environment by combining the excellence of the Montessori Method and a Christ-centered curriculum. The school operates under a religious exemption, and therefore is exempt from licensure pursuant to subsection B of Virginia Code 22.1-289.031. Our teachers are not certified by the state, although they are certified in the Montessori philosophy of teaching.
- River Room Montessori accepts enrollment for children 3-6 years of age, regardless of race, color, national origin, religion, and sex. River Room Montessori admits students of all faiths; however, by signing this agreement, you agree that upon enrollment, your child will respect Christian beliefs and practices daily.
- We offer half-day and full-day programs, year-round.
- We operate Monday through Friday from 8:30 A.M - 5:30 P.M.

GENERAL GUIDELINES

- Parents must sign their child in upon arrival and sign their child out upon departure, on a daily basis.
- As required by state law, each child will have a daily, afternoon nap or rest period.
- The children should arrive in their classrooms no later than 8:45 A.M. for morning sessions and 1:45 P.M. for afternoon sessions. Montessori instruction begins promptly at 9:00 A.M. and 2 P.M.
- Excessive tardiness/absences can result in a conflict for placement the following year. The school has full discretion in the appropriate classroom placement of each child, based upon the child's emotional, social, and cognitive status.
- River Room Christian Montessori does not believe in or allow the use of corporal punishment of any kind, at any time, under any circumstances to discipline any child. The children are encouraged to develop self-control.
- River Room Montessori is a PEANUT AND NUT PRODUCT-FREE facility.

AUTHORIZED RELEASE OF CHILD

River Room Montessori maintains a strict policy regarding the individuals to whom we will release a child.

In addition to the parents, only individuals who are listed on the child's emergency contact list will be allowed to pick up the child. Their names must be in writing; verbal permission via telephone is not legally sufficient for us to release a child. Please inform the office in advance if you (the parent) will not be picking up your child and an authorized, designated individual will do so; this person will be required to present identification upon arriving at school. (Initial: _____ / Date: _____)

EMERGENCIES

The parent(s)/guardian(s) authorize the school to obtain immediate medical care if an emergency occurs when the parent(s)/guardian(s) cannot be located immediately. The hospital and its medical staff have my authorization to provide any treatment which a physician deems necessary for the well-being of my child. These steps may include, but are not limited to the following:

- Attempt to contact a parent or guardian
- Attempt to contact any of the child's emergency contacts
- Attempt to contact the child's physician
- Transport the child to the appropriate medical facility if necessary
- Minor accidents/injuries will be treated at the school, and the parent(s)/guardian(s) will be notified of any such treatment.

*** If there is an objection to seeking emergency medical care, the parent(s) or guardian(s) should provide the school a statement **in writing**, to be kept in the child's file that states the objection and the reason for the objection.*

MEDICATION POLICY

- Please submit a medication authorization form, which is available in the office, for all medication to be administered at school during the school day. The school does not administer medication without written permission from the parent and/or physician.
- All medication to be administered at school must be kept in a locked box, in the school office.
- Medication must be presented in its original container with a label bearing the child's name, time, dose to be given, and the number of days to be administered.
- The school can administer any medication (prescribed or over the counter) for 10 days with the parent's authorization.
- The school can administer long-term medication (prescribed or over the counter) for 12 months with the parent's authorization and physician's authorization.
- It is the parents' responsibility to monitor the expiration date on Epinephrine, nebulizer medications, and inhalers.
- Medication will be returned to the parents or discarded after 14 days, if it is not picked up by the parents.

PROGRAM/SCHEDULE CHANGES/DISCOUNTS

- A 30-day's written notice is required to change the child's program/schedule. Requests for schedule changes must be submitted in writing and approved by the school. 1st change: free of charge / Every change thereafter: \$50 charge

TUITION DUE DATE & LATE FEE

- All Monthly Tuition payments are due by the fifth (5th) of each month. Payments can be made by check or cash.
- **A Late Fee of \$35 will be due to the school if tuition is paid after the 5th of the month. The delinquent payment and late fee must be paid to the school within 2 days. If there are two or more delinquent payments, the child's contract will automatically be terminated, and the child will be dismissed from the school. The tuition deposit will not be refunded or applied in this case.**
- The school will attempt to collect a payment a total of three (3) times. If a payment is returned due to insufficient funds, school will re-attempt that payment 5 days from the first attempt; when this happens, the school will also assess a \$30.00 return payment fee (RPF) that will attempt five (5) calendar days after the bank returns the payment. If the second attempt returns, the school will assess a second \$30.00 RPF and try a third and final attempt 5 days from the previously scheduled payment. In the event that the third payment returns, the school will assess another \$30.00, and the payment will fall into the unresolved balance and will need to be resolved directly with the school.
- River Room Montessori reserves the right to add a collection fee to any delinquent account balance that is referred to an outside collection agency/attorney for collections; furthermore, the parents will be fully responsible for all court costs, if the payment goes unsettled.

DEPOSIT

- A \$150 non-refundable Registration Fee is to accompany this Registration Form when it is submitted for consideration.
- **A one-month tuition deposit is required and due upon acceptance of enrollment.** This will apply to the **last month's tuition** of the child's contract year. The one-month's tuition deposit **WILL NOT** be refunded or applied, if the child fails to complete the full contract year. The one-month's tuition deposit is also non-refundable for any student who registers, but withdraws prior to their first day of attendance.
- A change of program and/or schedule will also change the amount of the deposit accordingly.

ITEMS NOT INCLUDED IN TUITION

- Snacks: The tuition does not include snacks.
- Fees for Additional Hours: Additional hours beyond the contracted hours can be arranged by contacting the school office in advance, and must be paid to the school by the end of the following day.
 - **Authorized** non-contract hours (before closing) will be charged at **\$15.00** per hour; please notify the school at least 24 hours in advance.
 - **Unauthorized** non-contract hours (before closing) will be charged at **\$20.00** per hour; unauthorized non-contract hours will apply to any unauthorized late pick-up.
 - **A late pick-up fee of \$10** for the first five minutes and **\$1** per minute after will be charged after closing time. The late fees will go directly to the teachers, who stay late waiting for parents to pick up their child(ren).

(Initial: _____ / Date: _____)

TWO-WEEK TRIAL PERIOD

A two-week trial period is provided for every student who enrolls at River Room Montessori. During the two-week trial period, the contract may be terminated without any further obligation/explanation on either the school or parents' part.

■ **Tuition:** During this period, the tuition is prorated for the time the child is actually in attendance.

■ **Refund of the One-Month's Tuition Deposit:** Except in the case that the school dismisses a child during the two-week trial period, the one-month's tuition deposit will not be refunded.

Dismissal from the School: In the case that the school dismisses a child during the two-week trial period, the child is entitled to a refund of all money paid, with the exception of the prorated tuition charged for the child's actual attendance. If at any time, for any reason not prohibited by law, in the sole judgment of River Room Montessori, the school feels that it cannot meet the needs of a child or family, the school reserves the right to decline continued enrollment to a child. In this case, the one-month's tuition deposit will be refunded. (Initial: _____ / Date: _____)

WITHDRAWALS

Parents may withdraw their child from River Room Montessori for any reason, at any time. Parents who choose to do so after the two-week trial period must give a **WRITTEN NOTICE 30 days on or prior to the first day of the month, during which the child will cease to attend.** The notice must include the expected last date of attendance and be signed and dated by the parents. Please note that any portion of a month that the child attends River Room Montessori is considered a full month for tuition purposes. (Initial: _____ Date: _____)

TERMINATION POLICY

- The enrollment and financial agreement is terminated when the child leaves the program, and **all** fees have been paid.
- If at any time, for any reason not prohibited by law, in the sole judgment of River Room Montessori, the school feels that it cannot meet the needs of a child or family, the school reserves the right to decline continued enrollment to a child.
- **The School's Right to Dismiss a Child:** The school reserves the right to dismiss new/continued enrollment for a child for consistent aggressiveness or disruptive behavior (either physical or verbal), as this is a hazard to the other children and staff members.
- River Room Montessori reserves the right to dismiss new or continued enrollment for a child, due to the parents' irresponsible financial commitment: **two or more delinquent payments**
- During the two-week trial period, the contract may be terminated without any further obligation/explanation on either the school or parents' part. The tuition during this period will be prorated for the time the child is actually in attendance; **however, the deposit will not be refunded**, unless the school dismisses the child. (Initial: _____ / Date: _____)

TERMS AND CONDITIONS OF ENROLLMENT

- I/we agree to perform the obligations of parents (or guardians) and abide by the policies and procedures set forth by River Room Montessori for the health, safety, and welfare of my/our child.
- The school has full discretion in the appropriate classroom placement of each child, based upon the child's emotional, social, and cognitive status.
- If at any time, for any reason not prohibited by law, in the sole judgment of River Room Montessori, the school feels that it cannot meet the needs of a child or family, the school reserves the right to decline continued enrollment to a child.
- All monthly tuition payments (12 installments) are equal, regardless of holidays, student absences, teachers' in-service days, or school closures due to inclement weather, natural disaster, or an "Act of God," which prevents school operations.
- No refunds will be made for days missed regardless.
- All students enrolled are entitled to two weeks vacation free of charge during the entire school year (Sept. thru August).
- The school agrees to notify the parent(s)/guardian(s) if a child becomes ill. In the event that River Room Montessori calls to inform me/us that my/our child is ill, I/we will pick-up my/our child as soon as possible.
- If a child is sent home because of an illness, he/she must be free of symptoms for at least 24 hours before returning.
- Upon the discovery of any communicable disease within my/our immediate household, I/we will inform River Room Montessori immediately (within 24 hours); a life threatening disease must be reported immediately.
- As the parent(s)/guardian(s), we authorize River Room Montessori personnel to seek medical attention for our child in the event of an emergency when we, the parent(s)/guardian(s), cannot be reached.**
- I/we certify that all of the information provided in my/our child's enrollment application is true, correct, and complete to the best of my/our knowledge and belief, and River Room Montessori is not responsible for anything that may happen as a result of false information provided at the time of enrollment.
- I/we have read the River Room Montessori Registration Form, including the overview, general guidelines, tuition, withdrawal, leave of absence procedures, and termination policy. I/We acknowledge that revisions to this enrollment form may occur, and that the information and policies may be subject to change. All changes will be communicated through official notices, and I/we understand that revised information may supersede, modify, or eliminate existing policies. I/we understand that it is my/our responsibility to comply with the provisions contained there, as well as any revisions made.
- Please consult the Director or School Administrator with any questions or concerns regarding any of the policies outlined in the River Room Montessori registration form prior to signing this document. My/our signatures indicate (s) that we have read and understand the registration form; furthermore, all of our questions have been satisfactorily answered.
(Initial: _____ / Date: _____)



We have completely read this REGISTRATION FORM and understand and agree to its contents.

Child's Name

Parent / Guardian Name (Print) Parent / Guardian Signature Date

Parent / Guardian Name (Print) Parent / Guardian Signature Date

Administrator Name (Print) Administrator Signature Date

** If there is an objection to seeking emergency medical care, the parent(s) or guardian(s) should provide River Room Montessori a statement **in writing**, to be kept in the child's file that states the objection and the reason for the objection.

Upon completion in filling out this registration for your child,
please mail or bring the application to:

River Room Montessori
4524 Wishart Road, #300
Virginia Beach, VA 23455

or email the application in pdf format to:

RRMontessoriOffice@gmail.com