



2019 Summer Camp Enrollment Agreement

I hereby apply for admission and care of my child, _____ (child's name), with Sunrise Montessori in their Summer Camp program. I agree to pay the weekly fee in the amount of **\$225**. To secure my child's spot, I have either paid the \$25 deposit on Sign Up Genius or if I am paying on the Thursday before camp begins or later, I paid for the entire camp fee of \$225 in full.

_____ **Camp Fee**

I understand and agree to pay the weekly \$225 camp fee for the first week of camp and all subsequent camps that I sign my child up for except for the last week of camp from August 12 – 14, 2019 which is only \$135. I also agree to pay any late pick up or bounce fees. **If I have paid the \$25 non-refundable deposit, I understand that the remaining \$200 will be charged on my credit card the Thursday before the week of camp begins.** I am aware that I have only one payment option and that is using a credit card. **I understand that this agreement covers not just the first week of camp that I sign my child up for but for all weeks of summer camp** that I sign my child up for and that my agreement to pay for each week of camp is not subject to change regardless of the reason for my child's absence(s). My \$225 summer camp fee includes: 1) care of my child between the hours of 7:00AM until 6:00PM, 2) field trips and splash play as noted on the summer camp calendar, and 3) transportation. There are no additional activity, field trip or splash play fees. I understand that unenrolling my child waives my right to reserve future enrollment. **Enrollment is not guaranteed until Sunrise Montessori has 1) A signed 2019 Summer Camp Enrollment Agreement, 2) the \$25 non-refundable deposit has been paid and 3) the required participation paperwork has been filled out, signed and returned.**

_____ **Multiple Summer Camp Enrollment**

I understand that if I sign up my child for more than one week of summer camp online via Sign Up Genius that this Enrollment Agreement, Statement of Understanding, and Credit Card Authorization forms only need to be signed once as they remain in force for EVERY Summer camp my child attends and will be kept on file. I understand that for each additional week of summer camp I sign my child up for that my credit card I am submitting with this paperwork will be charged the Thursday before the week of summer camp begins and if I need to use a different credit card that it's up to me to speak with Administration in the Office to fill out and submit a new Credit Card Authorization Form.

_____ **Termination of Enrollment Due to Non-Payment/Non-Communication/Absence**

I understand that if my account is not paid in full BEFORE the first day of the week of summer camp that I risk my child's enrollment being cancelled. I understand that the \$25 deposit is non-refundable and non-transferrable. I understand that if my child misses any part of that camp for any reason that I will not receive a refund. Once camp fees are paid, they are non-refundable and non-transferrable.

_____ **Pictures and Social Media**

I understand that by signing this Enrollment Agreement I am giving permission to Sunrise Montessori staff to take pictures and/or video of my child and to possibly use these pictures on Sunrise Montessori's website, posting on bulletin boards at Sunrise, Sunrise Montessori's Facebook page, Weekly Updates, Schoolwide Newsletters, Preschool2Me (attendance/reports/parent messaging), and Instagram. Neither child nor parents will be compensated for photos or video taken. If I do NOT want my child to have his/her picture taken, I will write a letter stating that, sign it and turn it in to Administration.

_____ **Late Pick Up Fees/Late Payment Fee/Returned Payment**

I understand that a **Late Pick Up Fee of \$2 PER MINUTE** will be assessed if my child is picked up after 6:00PM. The Late Pick Up Fees will be charged to my credit card attached to my account. Also, chronic late pick up of a child 7 or more times during the summer may result in termination of enrollment. **If a credit card payment does not go through for any reason, a \$25 Bounce Fee will be assessed. All bounce fees and late fees must be paid by noon the following business day or enrollment may be terminated.** If the credit card bounces 3 or more times during the school year, my child's enrollment may result in termination.

_____ **Food Allergies**

I understand that there are pecan trees growing on Sunrise Montessori's property and that they do not have any policy forbidding parents from sending food for their child that contains common allergies, such as peanut butter, nuts, eggs, milk or wheat. I further understand that Sunrise Montessori serves snacks that may contain these ingredients and if my child has a severe allergy to any foods that I am responsible for supplying all snacks for my child.

Liability Waiver

I understand that my child and all children at Sunrise Montessori will be engaging in activities that may involve risk or injury. I will not hold Sunrise Montessori including its agents and/or employees, responsible for risk or injury. In consideration for acceptance of my child as a student at Sunrise Montessori, the undersigned agrees to all of the aforementioned policies and procedures in this Enrollment Agreement. I am also aware that Sunrise Montessori can decline enrollment for my child for any reason. Sunrise Montessori does not discriminate on the basis of race, creed, color, ethnicity, national origin, religion, sex, sexual orientation, gender expression, age, height, weight, or physical ability.

Immunizations

My child's immunization, hearing and vision records are on file with _____ Elementary School.

Authorization for Emergency Medical Attention

In the event I cannot be reached to make arrangements for emergency medical care, I authorize a Sunrise Montessori Administrator to call an ambulance to transport my child to the nearest emergency medical facility. I understand that I, the parent, am responsible for all medical fees resulting from medical care. I give consent to Sunrise Montessori to secure any and all necessary emergency medical care for my child.

Transportation Authorization

I give permission for an authorized Sunrise Montessori employee to transport my child to and from Sunrise Montessori located at 60 Limmer Loop, Round Rock, TX 78665 in order to attend field trips. I am aware that my child will never be left unattended in any motor vehicle, that my child will board or leave a vehicle from the curb side of the street and that my child will be secured in a safety belt. I understand that Sunrise Montessori will post the field trip schedule each day near the door of my child's classroom and that I may be asked to sign it on field trip days. I understand that field trips typically leave by 9:00AM and that if I drop my child off after the bus leaves that my child will not participate in the field trip nor receive compensation for missing it.

Does your child have any allergies that we should know about? Please write YES or NO: _____
If your child requires an Epi Pen on site, we will need your doctor to provide an Emergency Allergy Action Plan. We CANNOT accept a child with allergies without an Emergency Allergy Action Plan filled out by a doctor and an Epi Pen.

Name of Child Male or Female? Date of Birth

Printed Name of Parent/Guardian Email Address

Mailing Address Cell Phone Number Work Phone Number

Signature of Parent/Guardian Date

Name of Authorized Pick Up #1 (i.e., another parent) Relationship to your child Phone Number

Name of Authorized Pick Up #2 Relationship to your child Phone Number

Name of Authorized Pick Up #3 Relationship to your child Phone Number

Please list the name, address and phone number of an emergency contact if a Parent cannot be reached:

Name Address Phone Number