



# PRESCHOOL "Dolphins"



## Pre-Kindergarten Program Registration Packet

2024/2025

...where swimming is part of the curriculum.

Welcome, Enrollment Options & Tuition Page 1

Parent Copy of Program Contract Page 2

Registration Form / Program Contract Page 3-4

Due: Time of Enrollment

**Authorization Agreement for Auto Payment** Pages 5

Due: Time of Enrollment

**Medical & Contact Info** 

Consent to Medical Care/ Promo Use Procare Online

Due: By August 31, 2024

**Certificate of Immunization (CIS) or Exemption** 

Due: By August 31, 2024

**Procare Online** 

#### Samena Swim and Recreation Club

15231 Lake Hills Blvd. Bellevue, WA 98007 Phone: **(425)** 746-1160 Fax: **(425)** 746-4485

www.samena.com

Preschool Coordinator: Rosie Steinhauer, ext.140, rosies@samena.com



#### **PRESCHOOL**

#### ...where swimming is part of the curriculum.

#### **Pre-K Program**

Thank you for enrolling in the Samena Preschool Pre-K Program. We take pride in offering quality, well-rounded programs that have been teaching children for more than 50 years. A unique benefit to our curriculum is the inclusion of swim lessons/free swim for 30 minutes each day.

Children must be 5 years old by January 31, 2025, and fully toilet trained to be eligible for enrollment. Our classroom maintains a 1:10 teacher to student ratio with a teaching team that is experienced, creative and caring. Age-appropriate activities include: art, reading and writing skills development, number recognition, music, science, cooking, storytelling, health & exercise, and an enhanced Pre-K curriculum that will allow students to be more than ready to enter Kindergarten. All Pre-K curriculum is taught in both English and Spanish!

Tuition rates are on a monthly basis. Tuition and curriculum are based on a ten-month program. Our holiday and vacation schedules closely (but not exactly!) follow the Bellevue School District calendar.

#### **Enrollment Options & Fees for School Year 2024/2025:**

	3 Hour Program (9am-12pm)		4 Hour Program (9am-1pm)	
	Member	Program Member	Member	Program Member
5 Days/Week				
Pre-K M/W/F	\$840	\$1,110	\$1,110	\$1,470
3-5 T/TH				
3 Days Pre-K M/W/F	\$545	\$725	\$725	\$965

- A non-refundable registration fee of \$150/student (\$200/family) and non-refundable \$200 deposit (applicable to first month's tuition) must accompany the completed Preschool Registration Form, Preschool Program Contract, and Authorization Agreement for Credit or Debit Card Automatic Payments form. These 5 items will reserve your child's spot.
- 2. The remainder of first and last month's tuition is due by **August 1, 2024** and will be processed automatically using the primary card on file.
- 3. In the event of a waitlist, a \$150 waitlist fee is required. If we are unable to secure a place for your child in the Preschool by August 1, 2024, the fee is refundable. If we have a space for your child and you choose not to enroll, the fee is non-refundable.
- 4. Cancellation policy: Registration fee and deposit are non-refundable. As of August 1, 2024, there are no refunds on the first or last month's tuition.
- 5. Additional school forms will need to be completed for all enrolled students and submitted to Procare Solutions by **August 31, 2024**. You will receive an invitation to create a Procare account via email.
- 6. Parents must complete the Authorization Agreement for Automatic Payment (page 5) as tuition will be automatically deducted each month.

<u>Keep this page for your records</u>. The above information also appears on the Program Contract (copy on reverse), which you will sign & submit at time of enrollment (pages 3 & 4).



### 2024-2025 Preschool Program Contract \*\*PARENT COPY\*\*

\*Original signed on reverse of Registration Form, page 4\*

Thank you for choosing Samena Preschool. We look forward to having your child in our program this school year. Please read and sign the \*\*Samena Copy\*\* on page 4 and return with your Preschool Registration Form. **Additional school forms will be required and must be submitted by August 31, 2024 via Procare.** You will receive an invitation to Procare via email.

#### **Payment Policy:**

- Registration Fee & Deposit: A non-refundable registration fee of \$150/student (\$200/family) and non-refundable \$200 deposit (applicable to first month tuition) must accompany a Preschool Registration Form, Preschool Program Contract, and Authorization Agreement for Credit or Debit Card Automatic Payments form.
- Remainder of first and last month's tuition is due by August 1, 2024 and will be automatically deducted each
  month using the primary card on file.
- Tuition payments are automatically deducted the first week of each month using the primary card on file.
- **Monthly tuition** is calculated based on the total cost of the school year and then divided equally by 10 months. This allows all monthly payments to be the same regardless of the number of days in the month. *There is no change in tuition due to family vacations, time off, illness, etc.*
- Cancellation Policy: As of August 1, 2024, there are no refunds on the first or last month's tuition.
- **Withdrawal Policy:** Written notice must be given to the Preschool Coordinator at least 30 days <u>before the 1<sup>st</sup> of the month</u> from which you are withdrawing from the program or changing days. Our preschool curriculum is designed to operate on the school year calendar with a commitment for September through June.

#### **Additional Fees:**

- Waitlist Fee: In the event of a waitlist, a \$150 waitlist fee is required. If we are unable to secure a spot for your child in the Preschool by August 1, 2024, this fee is refundable. If we have a space for your child and you choose not to enroll, the waitlist fee is non-refundable.
- **Schedule Changes:** There is no charge to add days to your current program beyond the difference in tuition if space is available. There is a \$50 administrative change fee to decrease the number of days attending.
- Late Pick Ups: A fee is charged at a rate of \$30/per each 10-minute increment you are late past your program end time. The late fee will be charged directly to your account using the primary card on file and will not be prorated. Please call if you will be late for any reason.

#### **Additional Information:**

- **Medication:** If your child requires medication, a medication information sheet must be completed authorizing Samena staff to administer medications to your child. Medication must be provided in its original container with written directions and dosing instructions for your child. Please contact the Preschool Coordinator for this form.
- **Communication:** For your child's safety, we ask that you provide in writing, or via email, to the Preschool Coordinator any changes to your emergency contacts including address and phone changes. These changes may also be updated in your child's Procare profile.
- **Promotions materials:** We request permission for the Samena Club to use any pictures or video taken of your child in future promotional materials for the Samena Club only. Samena maintains exclusive use of the photographs or videos; no photos will be sold. If you wish for your child to not be included in any promotional materials, please indicate this on Promotions Use Permission Form via Procare by August 31, 2024.

My signature on the original indicates that I/we agree to the Terms of the Samena Club Preschool, as listed on this contract. I have read and understand the terms of this agreement. I agree that I and all persons participating in the Samena Club Preschool are bound by and shall comply with the rules and regulations of the Samena Club as they may be amended from time to time.



FOR OFFICE USE				
Account #: _				
In Preschool Database:				

#### **PRESCHOOL**

## Pre-Kindergarten Program 2024-2025 REGISTRATION FORM

\*Program Contract must be signed on the <u>reverse</u> of this form at time of registration\*

Additional forms need to be completed prior to the school year

□ Member □ Non-Member Birth Date: / / Age at start of school: \_\_\_\_\_ Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_\_ Parent/Guardian: Occupation: Parent/Guardian: Occupation: Home Address: \_\_\_\_\_ Street Address City/Zip Email Address: Does your child have previous preschool experience? ☐ Yes ☐ No Has your child had previous swim instruction? □ Yes □ No 3 Hour Class 4 Hour Class Member Program Member Member Program Member **Class Selection** M-F\* \$840 \$1,110 \$1,110 \$1,470 ☐ 9am-12pm ☐ 9am-1pm M/W/F \$545 \$725 \$725 \$965 \*M/W/F in Dolphins Classroom, T/Th in Whales (3-5 y.o.) Classroom ------For Office Use Only------

Payment due at registration

Registration Fee (\$150 1 kid, \$200 2 kids) + \$200 Deposit Date: \_\_\_\_\_ Staff: \_\_\_\_\_ \$1

Tuition owed if registering after August 1

1<sup>st</sup> month: \$\_\_\_\_\_ Last month: \$\_\_\_\_\_ Date: \_\_\_\_ Staff:\_\_\_\_

WAITLIST
\$150 waitlist fee
Date:
\_\_\_\_\_
Staff:



#### 2024-2025 Preschool Program Contract

Thank you for choosing Samena Preschool! We look forward to having your child in our program this school year. The remaining forms must be submitted by August 31, 2024 via Procare. Watch for your Procare invitation via email.

Payment Policy: (Please initial next to each)
Registration Fee & Deposit: A non-refundable \$150/student (\$200/family) registration fee and \$200 deposit must accompany a Preschool Registration Form, Preschool Program Contract, and Authorization Agreement for Credit or Debit Card Automatic Payments form. The \$200 deposit will be applied to the first month's tuition.
First and Last month tuition is due by August 1, 2024 and deducted automatically using the primary card on file.
Tuition payments are automatically deducted the first week of each month using the primary card on file.
Monthly tuition is calculated based on the total cost of the school year and then divided equally by 10 months. This allows all monthly payments to be the same regardless of the number of days in the month. There is no change in tuition due to family vacations, time off, illness, etc.
Cancellation Policy: As of August 1, 2024, there are no refunds on the first or last month's tuition.
Withdrawal Policy: Written notice must be given to the Preschool Coordinator at least 30 days <u>before the 1<sup>st</sup> of</u> the month from which you are withdrawing from the program or changing days. Our preschool program is designed to operate on the school year calendar with a commitment for September through June.
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<ul> <li>Medication: If your child requires medication, a medication information sheet must be completed authorizing Samena staff to administer medications to your child. Medication must be provided in its original container with written directions and dosing instructions for your child. Please contact the Preschool Coordinator for this form.</li> <li>Communication: For your child's safety, we ask that you provide in writing, or via email, to the Preschool Coordinator any changes to your emergency contacts including address and phone changes. These changes maked be updated in your child's Procare profile.</li> <li>Promotions materials: We request permission for the Samena Club to use any pictures or video taken of your child in future promotional materials for the Samena Club only. Samena maintains exclusive use of the photographs or videos; no photos will be sold. If you wish for your child to not be included in any promotion materials, please indicate this on Promotions Use Permission Form via Procare by August 31, 2024.</li> <li>My signature below indicates that I/we agree to the Terms of the Samena Club Preschool, as listed on this contract. I have read and understand the terms of this agreement. I agree that I and all persons participating in the Samena Club Preschool are bound by any shall comply with the rules and regulations of the Samena Club as they may be amended from time to time.</li> </ul>
Parent/Guardian Name: Child's Name:

## AUTHORIZATION AGREEMENT FOR CREDIT OF DEBIT CARD AUTOMATIC PAYMENTS

Company:	SAMENA CLUB	
account indicat	ted below for tuition payments in the 20 r payment, and it is my responsibility to	credit/debit card transaction agent(s) to bill my credit/debit card 024-2025 school year. I understand that the primary card on file contact the billing department (billing@samena.com) if I need an
☐ Use my	primary credit card on file.	
received writte the DEPOSITOR	n notification from me of its terminatio	the completion of the school year or until Samena Club has in in such time and in such manner as to afford Samena Club and . If I need to change the payment method, I will provide written
Membership N	umber:	
Primary Membe	er Name: (Please Print)	
Primary Membe	er Signature:	Date Signed:

15231 Lake Hills Blvd. Bellevue WA 98007 Attn: Billing (425) 746-1160 ext. 124, billing@samena.com