



EARLY EDUCATION PROGRAMS

2600 Marriottsville Road · Marriottsville, MD 21104
Phone: (410) 442-5888, ext. 117 · Fax: (443) 419-3831
www.chapelgate.org/preschool

PRESCHOOL, KINDERGARTEN, AND KINDERGARTEN/1ST GRADE APPLICATION FOR 2018-2019

Please submit completed registration form with non-refundable registration fee of \$150.00. Checks should be made payable to: CCA with "Preschool," "Kindergarten," or "Kdg./1st Grade" and the name of your child in the memo line. Additional forms will be required before the first day of school. The registration fee does not apply toward tuition.

Date _____

Child's name _____
First Middle Last (Preferred Name)

Date of Birth ___/___/___ Gender _____

Street address _____

City _____ State _____ Zip _____

Home Phone _____ Preferred e-mail _____

Father's Name _____ Mother's Name _____

Cell Phone _____ Cell Phone _____

Occupation/Title _____ Occupation/Title _____

Business Phone _____ Business Phone _____

Are you members of a local church? ___ Name of Church _____

Is English the primary language spoken at home? _____

What other language(s) is spoken in home? _____

Other children in your family:

Name _____ Age _____ School _____

Name _____ Age _____ School _____

Name _____ Age _____ School _____

Other than parents, who do you want to be included on our pick-up list:

| Name | Relationship | Home Phone | Cell Phone |
|------|--------------|------------|------------|
| | | | |
| | | | |
| | | | |

Is there anyone who is NOT permitted to pick up your child? (If it is a parent, please attach legal documentation showing that they are not permitted to have custody of the child.)

No Yes

If you checked "Yes" print the person's name here: _____

Do you authorize and give consent to Chapelgate to publish and copyright all photographs in which your child appears for any and all programs and promotional materials? Yes No

Why have you selected Chapelgate's early education programs for your child?

Has your child been in any other organized early childhood programs?

Does your child have any health concerns, allergies or special needs?

What other things would you like us to know about your child?

How did you hear about Chapelgate's early education programs?

For Office Use Only:

\$150 Registration Fee check # _____

Application Form (3 pages)

Emergency Medical Info Form (2 pages)

Maryland Health Form (4 pages)

Copy of an official Birth Certificate

Discretionary medication form (only needed if child is taking medication during school)

TUITION RATES FOR 2018-2019

Instructions: Place a check mark in the “Session Requested” column to indicate the session you are requesting for your child. Sign and date this form and return it with other required documents and the \$150.00 registration fee to Mrs. Siggins.

| <u>*AGE</u> | <u># DAYS/WEEK</u> | <u>DAYS & TIMES</u> | <u>LUNCH BUNCH</u> | <u>TUITION</u> | <u>SESSION REQUESTED</u> |
|----------------------------------|--------------------|--|--------------------|----------------|--------------------------|
| 2 year olds | 2 mornings | Mon. & Fri. 9:00 – 11:30 AM | No | \$2,313 | |
| 3 year olds | 2 mornings | Tues. & Thurs. 9:00 -- 11:30 AM | No | \$2,198 | |
| 3 year olds | 2 mornings | Tues. & Thurs. 9:00 – 1:00 PM | Yes | \$3,470 | |
| 3 year olds | 3 mornings | Tues., Thurs., & Fri. 9:00 – 11:30 AM | No | \$3,292 | |
| 3 year olds | 3 mornings | Tues., Thurs., & Fri. 9:00 – 1:00 PM | Yes | \$4,574 | |
| 4 year olds | 3 mornings | Mon., Tues., & Thurs. 9:00 – 11:30 AM | No | \$2,990 | |
| 4 year olds | 3 mornings | Mon., Tues., & Thurs. 9:00 – 1:00 PM | Yes | \$4,272 | |
| 4 year olds | 4 mornings | Mon., Tues., Thurs., & Fri. 9:00 – 11:30 AM | No | \$3,990 | |
| 4 year olds | 4 mornings | Mon., Tues., Thurs., & Fri. 9:00 – 1:00 PM | Yes | \$5,261 | |
| 4 year olds | 5 full days | Mon. – Fri. 8:00 AM – 3:00 PM | Yes | \$5,783 | |
| Kindergarten | 5 half days | Mon. – Fri. 8:30 AM – 12:00 Noon | N/A | \$ 5,900 | |
| Kdg. / 1st Gr. | 5 full days | Mon. – Fri. 8:30 AM – 3:00 PM | N/A | \$ 8,900 | |

***Child should have turned class age by September 1, 2018**

Once a new student has been accepted for the following year, families are responsible for the first semester’s tuition unless they notify the Admissions Office in writing or via email that the student will not be attending CCA. This notification must be received no later than June 15th. All families withdrawing students at the conclusion of the first semester must notify (in writing or via email) the Admissions Office no later than January 15th to be exempt from paying tuition for the second semester. In all cases CCA will not refund the registration fee. Any new student officially accepted after June 15 but before August 15 has five business days to withdraw in writing to be exempt from paying the 1st semester tuition. When students are admitted on or after August 15th, parents are obligated to pay the full tuition for that semester (this applies to students enrolling in either first or second semester). Families whose student has been dismissed or expelled from CCA are responsible to pay the tuition through the end of the semester.

I have read the policy statement above and understand that by registering my student(s), at Chapelgate Christian Academy for the 2018 – 2019 school year, I am responsible for the tuition payments, unless I provide written or email notification of withdrawal prior to the deadlines identified above, as well as any late fees and/or collection costs if my account becomes delinquent.

Child’s Name: _____

Parent/Guardian signature: _____ **Date:** _____