

# ALLERGIES:



## COMPLETE BOTH SIDES

OFFICE USE ONLY  
DATE REC'D \_\_\_\_\_ ck # \_\_\_\_\_

### APPLICATION FOR ADMISSION TO SAN ANSELMO PRESCHOOL PRE-K CLASS

Name of Child: \_\_\_\_\_ Age in Sept. \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Preferred date to enter: \_\_\_\_\_ Nickname: \_\_\_\_\_ Gender: \_\_\_\_\_

Where did you hear about our program? \_\_\_\_\_

Parent's Residence: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_ H Phone: \_\_\_\_\_

Parent's (if applicable) \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_ H Phone: \_\_\_\_\_

E-mail \_\_\_\_\_ Alternate E-mail \_\_\_\_\_

Bill via:  E-mail \_\_\_\_\_  Mailing Address \_\_\_\_\_

Parent's Name \_\_\_\_\_ Occupation: \_\_\_\_\_ W Phone: \_\_\_\_\_

Business Address \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent's Name \_\_\_\_\_ Occupation: \_\_\_\_\_ W Phone: \_\_\_\_\_

Business Address \_\_\_\_\_ Cell Phone: \_\_\_\_\_

The following persons are **authorized** to take my child from school, and should be contacted in an emergency if parent / guardian cannot be reached.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

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Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Your child will not be allowed to leave with any other person without permission from parent / guardian

Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Office Address: \_\_\_\_\_

If this physician cannot be reached in an emergency, what action should be taken? Hospital(s) \_\_\_\_\_

Allergies or health problems: \_\_\_\_\_

Tuition is charged for times as listed. There is an additional fee for drop-in hours used on either end of your schedule.

The Pre-K class schedule is 8:30 AM – 12:30 PM, Monday – Friday.

Please check appropriate box for extended care.

12:30 – 3:30 PM

5 days

3 days (MWF)

2 days (T/TH)

12:30 – 6:00 PM

5 days

3 days (MWF)

2 days (T/TH)

### CONSENT FOR MEDICAL TREATMENT

AS THE PARENT, AGENCY REPRESENTATIVE OR LEGAL GUARDIAN, I HEREBY GIVE CONSENT TO SAN ANSELMO PRESCHOOL TO PROVIDE ALL EMERGENCY DENTAL OR MEDICAL CARE PRESCRIBED BY A DULY LICENSED PHYSICIAN (M.D.) OR DENTIST (D.D.S.)

FOR \_\_\_\_\_. THIS CARE MAY BE GIVEN UNDER WHATEVER CONDITIONS ARE NECESSARY TO PRESERVE THE LIFE, LIMB OR WELL BEING OF MY DEPENDENT. MY CHILD HAS THE FOLLOWING MEDICATION ALLERGIES:

\_\_\_\_\_

Signature of parent or guardian \_\_\_\_\_ Date: \_\_\_\_\_

Enclosed is my \$100 non-refundable registration fee.

Yes, add our names to the Parent Phone List

Include E-mail on Parent Phone List

**To avoid delay in registration, application and signed contract must be submitted together.**



**San Anselmo Preschool Center – Self Contained Pre-k**  
121 Ross Avenue, San Anselmo, CA 94960  
Telephone (415) 453-3181

The San Anselmo Preschool Center will offer preschool education and extended care to the undersigned upon the following terms and conditions:

**Section 1. Tuition/Payment Policy:** Tuition is charged based upon the schedule that you have selected. *Families with more than one child in the program receive a 10% discount on the lower of the two tuition fees.* Once accepted, your first tuition payment is due on or before the 20<sup>th</sup> of the month prior to your child’s starting date to reserve your child’s spot in the program. For example, if your child is to start in September, your first payment is due by August 20<sup>th</sup>. *If we do not receive your payment, your child’s spot is forfeited.* Children registered for our self-contained pre-k program without extended afternoon group schedules do not attend school during the Winter recess and Spring recess and are on a 9 ½ month billing cycle. **There are no refunds given for either days missed or holidays nor can we trade days.** However, by notifying the Director in writing at least two weeks in advance about vacations of two or more weeks your child’s space can be reserved and tuition reduced by ½ for the period the child is out. Because of the difficulty filling vacancies near the end of the school year, **any withdrawals during the last six weeks of school will be billed for the full month of June. At other times of the year two weeks written notice must be given for withdrawals** from the center, or a full month’s tuition will be charged. **Financial Aid is available on a limited basis.** Applications for Financial Aid are available upon request from the Director. There will be a \$20 returned check fee on all returned checks.

**Section 2. Registration:** There is an annual registration fee per family, which must accompany the registration card.

**Section 3. Late Pick Up:** The Preschool Center closes at 6:00 PM. **If a child is left longer, there is a \$1.00 fee for each minute that you are late.** You are responsible for notifying the Director or the Head Teacher if you are not able to pick up your child at your allotted time.

**Section 4. SCRIP:** Families of San Anselmo Preschool are required to either participate in EScrip or purchase paper scrip. Contributions accrued must equal at least \$10/month or \$100/year. You may choose not to participate and pay an additional \$100/year.

**Section 5. Parent Participation:** Parents with children participating in San Anselmo Preschool are required to complete 20 Parent Participation Hours. Included in the 20 hours, all families must commit to work one Wednesday Parent Aide during the school year.

**Section 6. Emergency Closure:** During the school year and especially during the winter months there is always the possibility that heavy rains and flooding, electrical failure or another emergency may force us to close the school for an entire day or part of a day. In such circumstances it is impossible for us to provide you with advance warning. As soon as the emergency closure has been determined we will leave a message on our voicemail and we will activate our emergency phone tree. In cases where we need to close the school during the school day it is imperative that you provide us with two emergency contacts on your Identification and Emergency Information form. It is not possible to refund tuition for emergency closure days nor can we trade days.

**Section 7. Medication:** The staff can only dispense medication of **any type** after the parent has filled out a medication permission slip. Permission slips must be filled out and signed on a daily basis, and medication must be stored in the kitchen area. When you bring your

child’s medication to school, it must be in its original bottle. Medication must be taken home at the end of each day.

**Section 8. Illness:** The preschool is not equipped to care for sick children. If a child is unable to participate in the normal routine the parent will be called and asked to take the child home. **Before returning to school, the child should remain at home fever-free for twenty-four hours.**

**Section 9.** Parents are required to notify the Preschool of any infectious and communicable diseases in your family.

**Section 10.** California law requires that each child must have a medical examination form filled out by a physician before he/she begins school.

**Section 11.** The Preschool Staff offers one formal conference and one informal conference with each child’s parents during the year. The staff is available to discuss your concerns at other times. However, we do not discuss a parent’s concerns within the child’s hearing range.

**Section 12.** Dress your child in old, comfortable clothing that will not restrict his/her play. We offer children messy play with water, sand, paint, etc. All removable clothing including shoes and boots must be marked with your child’s name. All children should bring a complete change of clothes in a shoebox, each item marked with your child’s name.

**Section 13.** Except for special books, tapes, insects, etc. which your child may bring to share, all toys should be left at home.

**Section 14.** Pets may come to the Preschool by prior arrangement only.

**Section 15.** We provide nutritious snacks that are low in fat and sugar, such as fresh fruit and vegetables, and water rather than fruit juices. We encourage the children to bring lunches that emphasize fresh fruits and vegetables, whole grain breads and low fat milk, meats, poultry, fish, and cheeses. We discourage high sugar foods such as candy, fruit rolls, cookies, cakes, fruit drinks, and high fat foods such as potato chips. If you wish to bring refreshments for your child’s birthday, please make arrangements with the group teacher. Simple birthday finger foods are preferred.

**Section 16.** The San Anselmo Preschool Center admits children regardless of race, creed or national origin. We reserve the right to exclude a child from attendance for any reason whatsoever including but not limited to health, lack of adjustment to the group situation, or delinquency of the tuition account. To qualify for admission to the Preschool a child must be 2 ½ years old.

**Section 17.** The Department or Licensing Agency shall have the authority to interview children or staff, and to inspect and audit child or facility records without prior consent. The licensee shall make provisions for private interviews with any child(ren), or any staff member, and for the examination of all records relating to the operation of the facility. The Department or Licensing Agency shall have the authority to observe the physical condition of the child(ren), including conditions which could indicate abuse, neglect, or inappropriate placement, and to have a licensed medical professional physically examine the child(ren).

**Section 18.** The parent or guardian who signs the contract is responsible for payment of tuition.

Child’s Name *(Please Print)* \_\_\_\_\_

Parent’s Signature \_\_\_\_\_ Date \_\_\_\_\_

School Representative \_\_\_\_\_ Date \_\_\_\_\_

application, Pre-K