

## 2023 Summer Preschool Rates for ages 2 - 5 year old children

		Daily Rate 3 or more days	Weekly rate (July 4 wk pro-rated)	Monthly rate
Option #1  7:00 a.m. - 12 noon	2 year	\$31 per day	\$155 per week (July 4 WK: \$93)	\$620 June/\$558 July
	3 year	\$28 per day	\$140 per week (July 4 Wk: \$84)	\$560 June/\$504 July
	4 year	\$28 per day	\$140 per week (July 4 Wk: \$84)	\$560 June/\$504 July
	Kinder	\$25 per day	\$125 per week (July 4 Wk: \$75)	\$500 June/\$450 July
Option #2:  9:00 a.m. - 3:00 p.m.  (Early stay CANNOT be added to this option)	2 year	\$32 per day	\$160 per week (July 4 Wk: \$96)	\$640 June/\$576 July
	3 year	\$32 per day	\$160 per week (July 4 Wk: \$96)	\$640 June/\$576 July
	4 year	\$32 per day	\$160 per week (July 4 Wk: \$96)	\$640 June/\$576 July
	Kinder	\$30 per day	\$150 per week (July 4 Wk: \$90)	\$600 June/\$540 July
Option #3:  7:00 a.m. - 6:00 p.m.  Your child does not have to stay all 11 hours	2 year	\$40 per day	\$200 per week (July 4 Wk: \$120)	\$800 June/\$720 July
	3 year	\$40 per day	\$200 per week (July 4 Wk: \$120)	\$800 June/\$720 July
	4 year	\$40 per day	\$200 per week (July 4 Wk: \$120)	\$800 June/\$720 July
	Kinder	\$35 per day	\$175 per week (July 4 Wk: \$105)	\$700 June/\$630 July

### Discounts for multiple siblings or military:


Child attending half day (options #1)                      10% off total

Child attending extended or full (options #2 or #3)                      15% off total

2023

Preschool Summer Registration: Form #1

for Ages 2 - 5 years old (going to Kindergarten in the fall)

Date	Child's name	
Registration fee  included \$30 one child \$55 two or more kids	Circle your choice:    credit/debit card    bill to BW app	
Child's Birthdate	Parent name(s)	
Mom's cell	Mom's Email	
Dad's cell	Dad's Email	
Circle days* to attend	Circle time-frame to attend	Check weeks to attend
M T W TH F	7-12:00    9-3:00    7-6:00	[ ] June 5 - 9
M T W TH F	7-12:00    9-3:00    7-6:00	[ ] June 12 - 16
M T W TH F	7-12:00    9-3:00    7-6:00	[ ] June 19 - 23
M T W TH F	7-12:00    9-3:00    7-6:00	[ ] June 26 - 30
W TH F 3-day tuition rate	7-12:00    9-3:00    7-6:00	[ ] July 5 - 7 (3-day week)
M T W TH F	7-12:00    9-3:00    7-6:00	[ ] July 10 - 14
M T W TH F	7-12:00    9-3:00    7-6:00	[ ] July 17 - 21
M T W TH F	7-12:00    9-3:00    7-6:00	[ ] July 24 - 28
Preschool closed with NO classes from July 31 - August 11		
*No 2-day option Must attend 3 or more	New school year begins Monday, August 14	

Child's Name \_\_\_\_\_

Questionnaire: Form #2

Summer 2023

1. My child attended preschool during the fall 2022/spring 2023 year	Yes	No
2. We have the Brightwheel app for this child I am registering	Yes	No
3. I plan to pay tuition (daily is NOT an option)	Weekly	Monthly
4. I will pay tuition with (cash or check NOT accepted to pay tuition)	Debit/credit	Bank withdrawal
5. Mom or Dad is active/retired military or law enforcement	Yes	No
6. Mom's workplace: Job description:	Work Hours	
7. Dad's workplace: Job description:	Work Hours	
8. We will have other children attending summer preschool (besides this registration):	Name	Name
9. CNP has permission to take my child's photo for (circle) (Brightwheel app can only be accessed by registered parents)	Class projects	Brightwheel app
10. I have supplied photo IDs for (circle) (Any other person picking up on a regular basis will also need to have an ID) If you are a returning family and you know we already have your IDs, you don't need to send them again.	Mom	Dad
11. I have supplied/am supplying my child's immunization record My child is not immunized, so we sign a waiver (waiver must be on file)	Yes Yes	[Required] No
12. I have completed the AZ state childcare licensing form called "Emergency Card"  Even if your child attended preschool last year, you MUST fill out a new form	Yes	Need new form
13. My child is completely potty trained meaning he/she pulls his/her own clothes up and down, wipes self after pee & poop, washes hands, does not need constant reminders to go, does not wear pull up at nap or during the day  If NO, please explain:	Yes	No
14. I give permission for my child to "travel" with his/her class and teacher(s) to different buildings and playgrounds on the Calvary North campus.	Yes	No
15. I understand that this is a Christian program thus my child will be taught Christian principles and about Jesus Christ using the Old/New testaments of the Christian Bible Calvary North is a non-denominational church whose beliefs can be found on our website Calvarynorth.com	Yes	No
16. We plan to register our child for fall preschool (Separate registration paperwork required)	Yes	No

Handbook Agreement: Form #3

Summer 2023

Go to [Calvarynorth.com](http://Calvarynorth.com)

Click "school" at the top of the page

Click "preschool"

Click the rectangular box "Parent Handbook"

Please read ALL policies carefully

If you need additional information or explanation about any of our school policies, please contact Cindy Joiner, director

[cindy@calvarynorth.com](mailto:cindy@calvarynorth.com)

Work cell: 602-706-5643

Office: 602-992-6922, ext. 25

**STOP: Don't just sign this form. Did you really read it?**

\*\*\*\*\*cut off this signed portion and return\*\*\*\*\*

Return this form with registration paperwork (both new and return families)

I have read all of the CNP parent handbook. I understand all school rules and agree to abide by those rules, so my child(ren) and family have a positive, safe, and fair experience while participating in this program.

Mom print name \_\_\_\_\_ Date \_\_\_\_\_

Dad print name \_\_\_\_\_ Date \_\_\_\_\_

Child's name \_\_\_\_\_

Tuition Payment: Form #4

Summer 2023

Child's name \_\_\_\_\_

Person paying tuition \_\_\_\_\_

Contact phone number \_\_\_\_\_

Contact email \_\_\_\_\_

We are choosing to pay (summer only)     weekly     monthly

We will set our tuition to  auto charge/withdrawal in Brightwheel

no auto in Brightwheel app

We will pay with  debit card  credit card  bank withdrawal

Please supply the following AND put the information into the billing section of the Brightwheel app     Already on file with the preschool

1. Credit/debit card

Name on card \_\_\_\_\_

Card number \_\_\_\_\_

Exp. Date \_\_\_\_\_ Security code \_\_\_\_\_

.....  
Or 2. Bank withdrawal

Name on account \_\_\_\_\_

Routing number \_\_\_\_\_

Name of bank \_\_\_\_\_

Your personal account number \_\_\_\_\_

## Tuition Payment and Fees Information

Important:

You are allowed to pay your child's summer tuition **weekly or monthly**.

You can register for less than 5 days, but the daily rate must be paid at the beginning of the week.

For example:

If you register for 3 days per week at a rate of \$20 per day, you would need to pay \$60 on Monday of that week.

Absence from illness:

If your child gets sick and was not able to attend the days you paid for, you will receive a refund; however, **it is your responsibility to let us know your child is out sick** through the Brightwheel app or by emailing my assistant director:

Andrea [pre-admin@calvarynorth.com](mailto:pre-admin@calvarynorth.com)

No refund will be given after the end of the week for which your child is registered if you don't notify us. In other words, if you register for a certain week, your child gets sick and can't attend but, you didn't let us know during the registered week, you will not be refunded.

Make up days are NOT available during the summer session.

How to pay tuition

Tuition will be paid by debit/credit card or bank withdrawal - no cash or checks accepted

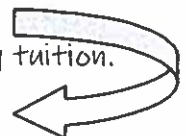
You will supply your debit/credit card number or bank information in TWO places

1. On the paper form included in this registration: Form #4
2. Enter in the Brightwheel app under the billing portion

You can choose in the BW app to pay "auto." The amount will be charged to your card or withdrawn from your bank account either weekly or monthly as you've chosen. We cannot guarantee the amount will be taken on certain days, so if you need the money to be charged/withdrawn on a particular day (every Monday, for example), you'll need to choose the next option of NOT setting to auto.

You can NOT set the BW app to auto, but then YOU MUST go into the app to pay tuition.

NOTE: each child will have a separate bill/account. We do not bill family rates.





CDC/SGH# or name: \_\_\_\_\_

**Arizona Department of Health Services  
Bureau of Child Care Licensing  
Emergency, Information and Immunization Record Card**

<b>Child's Name:</b>	<b>Date Enrolled:</b>	<b>Updated:</b>
<b>Home Address (#, Street, City, State, Zip Code):</b>		<b>Date Disenrolled:</b>
<b>Home Phone:</b>	<b>Date of Birth:</b>	<b>Sex:</b> <input type="checkbox"/> male <input type="checkbox"/> female

<b>Parent or Guardian Name:</b>	<b>Home Address (#, Street, City, State, Zip Code):</b>
<b>Cell Phone (optional):</b>	<b>Contact Telephone Number:</b>

<b>Parent or Guardian Name:</b>	<b>Home Address (#, Street, City, State, Zip Code):</b>
<b>Cell Phone (optional):</b>	<b>Contact Telephone Number:</b>

**I authorize the following individuals to collect my child from the facility in case of emergency or if I cannot be contacted:  
(Pursuant to R9-5-304.B, at least two contact persons are required.)**

<b>Name:</b>	<b>Contact Telephone Number:</b>
<b>Name:</b>	<b>Contact Telephone Number:</b>
<b>Name:</b>	<b>Contact Telephone Number:</b>
<b>Name:</b>	<b>Contact Telephone Number:</b>

**If Medical care is necessary, call:**

<b>Health Care Provider*</b>	<b>Name:</b>	<b>Contact Telephone Number:</b>
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\*A Health Care Provider is a physician, physician assistant or registered nurse practitioner.

I hereby give authority to any hospital or doctor to render immediate aid as might be required at the time for his/her health and safety.

<b>In case of injury or sudden illness, I request that this individual be called first:</b>	
-------------------------------------------------------------------------------------------------	--

The following individual(s) may NOT remove my child from the facility:

<b>Name(s):</b>
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Custody papers have been provided and are on file at the facility.  yes  no

Telephone Authorization Code (optional): \_\_\_\_\_

**Immunization Information**

(A licensee shall attach an enrolled child's written immunization record or exemption affidavit to the enrolled child's Emergency, Information and Immunization Record card.)

For information regarding current immunization requirements go to:

[www.azdhs.gov/phs/immun/index.htm](http://www.azdhs.gov/phs/immun/index.htm) or contact the Arizona Immunization Program Office at (602)364-3630.

One of these items must accompany the EIIR card at all times:

<input type="checkbox"/>	Copy of current official documented immunization record attached
<input type="checkbox"/>	Religious Beliefs exemption form signed by parent/guardian attached
<input type="checkbox"/>	Medical Exemption form signed by physician and parent/guardian attached
<input type="checkbox"/>	Signed Laboratory Proof of Immunity form attached

Notification of immunizations needed sent to Parent(s) or Guardian(s):	mo /day/ yr	mo /day/ yr	mo /day /yr
Updated immunizations received and attached:	mo /day/ yr	mo /day/ yr	mo /day /yr

**Medical Information**

<p>Is child allergic to food or other substances? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, describe symptoms, name foods or substances to be avoided, and the procedure to follow if reaction occurs:</p>
<p>Is child usually susceptible to infections and if so, what precautions need to be taken? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, list precautions:</p>
<p>Is child subject to convulsions and what should be our procedure if one occurs? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, specify procedure:</p>
<p>Is there any physical condition that we should be aware of and what precautions should be taken (heart trouble, foot problem, hearing impairment, hernia, etc.)? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>If yes, list precautions:</p>
<p>Additional comments:</p>
<p>Other special instructions:</p>

This **Emergency Information and Immunization Record Card** is accurate and complete, front and back, and was provided by:

Parent/Guardian PRINTED Name:	SIGNED Name:	DATE:



## 2023 Summer Registration checklist

All of the following must be returned to secure your child's spot!  
Check each one, so you don't miss anything

- Form #1 - Registration
- Form #2 - Questionnaire
- Form #3 - Handbook agreement (even RETURNING families, please)
- Form #4 - Tuition payment
- #5 AZ Emergency Form (even returning families)
- #6 Immunization record or signed waiver
- #7 Photo IDs of Mom and Dad (if we don't already have them)

Also send IDs for anyone who will regularly pick up your child like a grandparent or nanny.

- #8 Non-refundable registration fee:

\$30 one child/\$55 two or more kids

Please charge my registration fee

to the credit/debit card I have provided on Form #4