2023 - 2024



Application for Admission

30075 Comercio, Rancho Santa Margarita, CA 92688 TEL: 949-589-6440



PLEASE COMPLETE			
We are applying for admission	Today's date://_ start date:	<i>J</i> /	
to the following program:	Child's name:		
PRESCHOOL (2-5 years old)	Birth date:		
Half Day 3/4/5 School Day 3/4/5	Gender: Female [] Male []:		
■ 8 Hour Day 3/4/5■ Full Day 3/4/5	Parent's Name:Relat	ionship to child:	
KINDERGARTEN (5-7 years old) 5 School Days	Phone: E-mail:		
	Parent's Name:Relation	onship to child:	
5 8 Hour Days 5 Full Days	Address:		
We are interested in starting:	Other children in family (and ages):		
//_ or as soon as possible []	Name:	Age:	
	Name:	_Age:	
	Name:	Age:	

2023 – 2024 ACADEMIC PROGRAMS (September 2023 through August 2024)

Preschool (Ages 2-5 years)	
Full Day (7:00 am -6:00 pm)	☐ 5 Days \$1409/mo. ☐ 4 Days \$1359/mo. ☐ 3 Day \$1309/mo.
8 Hour Day (7:00 am-3:00 pm or 8:00 am – 4:00pm)	5 Days \$1359/mo. 4 Days \$1309/mo. 3 Days \$1259/mo.
School Day (8:30 am – 3:00 pm)	☐ 5 Days \$1269/mo. ☐ 4 Days \$1219/mo. ☐ 3 Days \$1169/mo.
Half Day (8:30 am – 12:00 pm)	☐ 5 Days \$1139/mo. ☐ 4 Days 1089/mo. ☐ 3 Days \$1039/mo.
Kindergarten -1st Grade (Ages 5 through 7)	
Full Day (7:00 am -6:00 pm)	5 Days \$1409/mo.
8 Hour Day (7:00 am-3:00 pm 8:00 am – 4:00pm)	5 Days \$1359/mo.
School Day (8:30 am – 3:00 pm)	☐ 5 Days \$1269/mo.

Important School Policies:

1. Refund of Tuition

- a. There will be no refund for tuition or any other fees or charges prepaid unless expressly provided in this Application for Admission or the Terms of Enrollment
- b. If your child no longer attends our school and you have prepaid the tuition for the entire school year, you will be eligible for a refund of the prorated tuition for the remaining months of the school year. Such prorated tuition will be calculated as follows: take the number of months remaining for the 12-month school year, dividing that by 12, and then multiplying by the annual tuition prepaid.
- c. You understand and acknowledge that if the School has to close its campus because of events outside of its reasonable control, including without limitation, government orders, riots, strikes, natural disasters, the School will not refund any tuition prepaid for the month when the campus closure becomes effective, unless such closure takes place on the first day of the month. In addition, for the prepaid annual tuition, the refund will be calculated on a prorated basis, taking the number of months remaining for the 12-month school year, dividing that by 12, and then multiplying this number by the annual tuition prepaid.
- d. There will be no refunds or credits for the days your student is absent from the school.

2. Tuition Discount

- a. Sibling Discount. To ease the strain of meeting tuition payments for large families, the School has implemented the following financial aid policy. The tuition discounts indicated below only apply to tuition payments and do not affect other fees or charges.
 - 2 enrolled children within the same household: first child full tuition, second child 10% off 3 or more enrolled children within the same household: first child full tuition, second child 10% off, third or any child thereafter 15%

^{*} Please Note: Hours are subject to change- The school reserves its right to adjust the tuition periodically.

^{*}Sibling Discount will be applied to the older sibling or whoever pays less amount of tuition.

- b. Full Payment Discount. A 5% discount will be applied if the twelve month tuition is paid upfront when the family signs up for enrollment.
- c. Military Appreciation Discount. 10% discount will be applied to the tuition of active-duty military personnel, veterans or law enforcement personnel's child.
- d. You may choose to use only one of the two above-mentioned discounts. Those two discounts cannot be combined.

3. Fees and Charges

- a. **Annual Registration Fee.** An annual registration Fee of \$180 is due at the beginning of each school year for each child. This fee covers the registration process and therefore is **NON-REFUNDABLE**.
- b. **Annual Material Fee.** A **non-Refundable** annual material fee of \$180 per child is due 1st day of the school year whether enrolled on-site or virtual.
- c. Security Deposit/Withdrawal: A \$400 security deposit is due upon enrollment. If a parent or guardian has provided a thirty-day advance written notice of withdrawal via email to our school Director, the security deposit will be applied toward the tuition for the last month of attendance or if you have prepaid the tuition for the last month of attendance, a \$400 refund check will be mailed to the parent or guardian's address on record within 60 days from your child's last date at our school. The security deposit will be forfeited if no written notice is given, or the written notice is given but less than the prescribed thirty-day in advance or your child is dismissed from the School for any reasons stated in this Enrollment Form.

d. Miscellaneous Fees and Charges

- A \$25 Earthquake Kit Fee per child is due at the time your child begins school or such kit needs to be provided by the parent or guardian.
- A \$50 Service Fee will apply if a check is returned by the bank.
- A \$50 late fee will apply if the monthly tuition payment is received by the School after the fifth day of each calendar month.
- A Late Pick-Up Fee (\$20 for the first 15 minutes and \$5 every minute thereafter) per child will apply if the student is picked up after the end time for the program in which she or he is enrolled.
- Failure to sign in or sign out your child will result in a fee of \$10 per child per time. Please understand that the licensing requirement mandates the school to pay a \$500 fine if the parent or guardian fails to sign his or her child in or out.
- 4. **Request to Switch Programs.** Any requests to switch between Full Day Program and Part-Time Program must be submitted in writing via email to the School Director. If granted, such change will be effective from the beginning of the next calendar month following the date of the written request. We will try our best to accommodate your request, however, a spot in the program you desire to switch your child(ren) to can not be guaranteed as the availability will depend on the program capacity and the actual enrollment at the time of your request. For your child(ren) to start in the new program from the next calendar month following the date of the written request, a parent or guardian must submit the request to switch at least five days prior to the first date of such calendar month so that the School will have sufficient time to process and coordinate between the programs. A request submitted outside the prescribed time frame will be considered on a case by case basis.

Example 1: if a student wishes to switch from Part-Time to Full Day and a written request was submitted on January 5th, if granted, such change will be effective on Feb 1, from January 5th through Jan 31st, the student will remain in the Part-Time program and pay the Part-Time tuition fee.

Example 2: if a student wishes to switch programs and start in the new program from November 1, a written request to switch must be submitted five days prior to November 1.

5.	School	Directors'	Email Address:

Director: Judi Niemela	Email: judi.n@limaimontes:	sori.com
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- 6. Acknowledgement by Parent or Guardian. As the parent or guardian of the student, I acknowledge that I understand that tuition payments cannot be waived due to child(ren)'s illness. I understand that, subject to the provisions in this Application for Admission Form and the Terms of Enrollment, once I accept an enrollment, the annual registration fees (\$180) and annual material fee (\$180) paid are non-refundable and non-transferable unless otherwise expressly herein. I understand that a 30-day advance written notice is required should I choose to withdraw my child(ren). I understand that tuition is due on the 5th day of each calendar month, or a late fee (\$50) will apply for any tuition paid after the 5th of the month. Please refer to the Parent Handbook for additional information.
- 7. Review of School Surveillance Camera Footage. Parent or guardian has no right to review the school surveillance camera footage unless your child is physically injured at our school. Parent or guardian may only review our surveillance camera footage for the date of your child's physical injury at our school. Parent or guardian must make an appointment with our school Director in advance to review such footage, and the viewing shall be no more than 15 minutes unless approved by the Director on a case by case basis.
- 8. If there is any conflict between this Application for Admission form and the Parent Handbook, the terms in this Application for Admission shall prevail.

Please sign below return to	us either in-person, by ema	il (<u>rsm@limaimontessori.co</u>	om)	
Understood, Acknowledged	d and Agreed:			
(Date)	(Signature of Parent/G	uardian)		
(Date)	(Signature of Director/	Principal)		
Date of acceptance:	Enrollment fees p	aid: Registration \$180	Materials \$180	
Check #	-			
Security Deposit: \$400	Check #	Start Date:	Class Assigned:	

Child's Name:	Birth Da	te:	_
Start Date:	Schedule:	Tuition:	
	TERI	MS OF ENROLLMENT	
after the 5 th day of each		of each calendar month and are be accepted until the first mont	· ·
There will be an automa	atic \$50 charge for any and all ret	urned checks	lnitial: []
School Director, my chile enrollment, subject to s	d(ren) may NOT be accepted for	attendance, and that student's s	pecific arrangements approved by the pace may be considered open for new
Extended Day care is \$3		ur, or \$150/day for Primary prog	Program, the charge for such temporary gram any part thereof, due at the time o
	n tuition rates CANNOT be made f		
	WITHDRAWAL OF A STUDENT FRO		IUST BE SUBMITTED IN WRITING ATInitial: []
Christmas Eve and Chris Independence Day, Spri generally be observed o Monday after. No tuitio	tmas Day, New Year's Day, Martii ng and Winter Breaks and Staff D	n Luther King Day, President's Dag evelopment Day. For holidays th that fall on a Sunday, the holiday in this paragraph.	at fall on a Saturday, the holiday will y will generally be observed on the
	responsible for informing the school echild from the school.		numbers, and of people who areInitial: []
expose children to any t	raditional religious holidays, inclu	ding Christmas, Easter, Passove	religion. We also reserved the right to r and Hanukkah in storytelling, plays,Initial: []
an automatic \$10 charge	re required by law to sign your Fu e per child each time if there is a	failure to sign in and out by a	time in and out each day. There will be

NO PERSON UNDER THE AGE OF 18 WILL BE PERMITTED TO SIGN A CHILD IN OR OUT WITHOUT A SIGNED RELEASE FROM THE
PARENT/GUARDIAN. If you are separated or divorced, we must have a court order to restrain the other parent from picking up the child
Tie Cilia
There is a space in your child's Health History form to list allergies. Please fill this out carefully, including sensitivities to food, smells, insect bites or stingsInitial: []
Parents/Guardians must secure alternate care for sick children. Pursuant to the California Health Department's policies, a child cannot be accepted in school if he/she shows signs of illness upon their arrival in the morning. We ask that you keep sick Children at home if they have experienced any of the following symptoms within the past 24 hours: a fever over 100 F (37.8 C) orally • uncontrollable coughing • diarrhea, vomiting, or an upset stomach • unusual or unexpected oss of appetite, fatigue, irritability, or headache • any discharge or drainage from eyes, nose, ears, or open sores • undiagnosed rashes. Children with any of these symptoms will be returned home. We appreciate your cooperation with this policy. Initial: []
PHOTOGRAPHS, VIDEOS AND AUDIO TAPES: I understand and agree that, in consideration for being allowed to photograph, videotape or audio record my child on school's property; I shall only use such recording for lawful and private home use and will not publicly display or sell such recordings
MEDICATION: I understand that it is not the school's responsibility to administer any medication, regardless of prescription or over-the –counter medication. If medication must be administered during the day, the school can only administer over-the-counter medication. All medication I intend the school to administer will be in the original container with a label from the charmacy that clearly states the expiration date and exact dosage and times to be given. I agree to fill out the Non-Prescription Medical Treatment Instruction, Consent and Waiver form and give the medications and completed forms to the School Director. I understand that I must strictly follow all school's policies related to the administration of medication in the school. ——————————————————————————————————
TERMINATION: We reserve the right to refuse service to anyone. In the event that a child becomes a danger or a threat to the ohysical safety of himself, our staff or other students, he/she might be dismissed from our program. In this case, prorated refunds of prepaid tuition, if applicable, will be given based on the child(ren)'s attendance. If parent or guardian fails to comply with any of our applicable school policies, or he or she acts disrespectfully when interacting with any of our staff, we reserve the right to terminate the services to you with a full refund of the security deposit and a prorated refund of prepaid tuition, if applicable. Our school has the absolute discretion to determine whether your child poses a danger or a threat to himself, our staff or other students, and to determine whether parent or guardian fails to comply with any of our school policies, or whether parent or guardian acts disrespectfully when interacting with any of our staff
EMERGENCY CONTACTS: I understand that I am required to provide and maintain at all times a minimum of two additional emergency contacts other than myself, including full names, home and work phone numbers, cellular phone numbers, addresses, driver's license numbers or state identification numbers, and relationship to my child(ren). I understand that in the event of any emergency for which I cannot be reached and the emergency contacts cannot be reached, that the school may contact the police or other local authorities for assistance

I understand that the Community Care Licensing Division has the authority to or Child Care Center records, without my prior	interview children or staff, to inspect and audit child
consent	Initial: []
Licensing "Inspection Authority" per section #101210 (b) (c) Admission section #101195 (b) & (c) are quoted below:	on Agreements which references.
The Department or licensing agency shall have the authority to inter or facility records without prior consent. (1). The licensee shall make provisions for private interview the examination of all records relating to the operation A. The Department or licensing agency shall have the authority to including conditions which could indicate abuse, neglect, or inapmedical professional physically examine the child(ren). B.	os with any child(ren), or the staff member and for of the facility. observe the physical condition of the child(ren),
PARENTS ARE FINANCIALLY RESPONSIBLE FOR DAMAGE TO THE SCHOOL FAC CHILD(REN)	
Each time a tuition or fee payment is made to our school, our payment receipt to the email you used to register. Parents and/or guardians und to save such receipts timely, and our school will not provide a summary requested	derstand and agree that they have the obligation of your payments except for our tax ID if
SCHOOL IS NOT RESPONSIBLE FOR CHILDCARE TO A STUDENT DURING SCHOOL	OL HOLIDAYSInitial: []
I have received, read, understood, and signed the LMA September 2023– Aug	
I have read, understood, acknowledged, and signed the LMA Parent Handboo	okInitial: []
I have read, understood, acknowledged, and signed the Release of Liability \dots	Initial: []
I have received a copy of the LMA September 2022– August 2023 Holiday and I agree with all the Terms of Enrollment.	
Print Child's Name:	Birthdate:
Print Parent's or Guardian's Name:	Phone:
Parent's or Guardian's Signature:	Date:
Director Signature: Date:	