

BETHESDA ALL STARS REGISTRATION

September 2019

Name of child: _____ Date of birth: _____
Family Address: _____ Main Telephone: _____

Email Address _____

Name(s) of parent(s) or caregiver(s): _____

Parents' or caregivers employment: _____

How did you hear about us? _____

REGISTRATION FEE: Initial enrollment fee of \$30 for one child/ \$50 for more than one child.
Re-enrollment fee of \$50/family for families taking the summer off and returning in the fall.

DEPOSIT: \$200 non-refundable fee, **for full time care enrollments**, which will be applied to the first month's tuition or forfeited should you withdraw from the Bethesda All Stars. (Does not include morning preschool)

SUMMER ACTIVITY FEE: \$20 will be charged to each full time enrolled child in June.

Please register my child for:

PRESCHOOL:

- _____ **2 Day** a week Preschool (Tues/Thur) Tuition is \$160 a month.
- _____ **3 Day** a week Preschool (Mon- Wed – Fri) Tuition is \$185 a month.
- _____ **4 Day** a week Preschool (Monday through Thursday). Tuition is \$210 a month.
- _____ **5 Day** a week Preschool (Monday through Friday). Tuition is \$235 a month.

Hours for morning preschool are **7:45 am-noon**. Breakfast and lunch is included in your monthly tuition. Preschool follows the Moorhead Public Schools calendar.

- _____ **Full Time/ Full Day Preschool:** Monday-Friday 7AM-6PM. Tuition is \$35/day.

KINDERGARTEN – AGE 12:

- _____ **Full Time School age Care:** Monday-Friday 7AM-6PM. Tuition is \$18.50/school day and \$32 summer and vacation days.

Tuition assistance is available for qualifying families. A 10% scholarship will be given for members of BLC. BLC families who qualify for tuition assistance would not be eligible for the 10% discount. The 10% BLC discount and BAS tuition assistance does not apply to the morning only preschool program.

I will bring my child to the center at: _____AM/PM on school days.

I do not need care for my child before school; they will arrive at BAS on the bus. _____

I will pick up my child from the center by: _____AM/PM

Drop off and pick up times are very important for planning, please list accurate times. Please notify the director if you need to adjust your scheduled times.

Signed: _____ Date _____
(Parent/caregiver signatures)

-----For center use only-----

Registration fee must accompany this application. Paid \$ _____

Approved _____ Date _____ Start Date of child _____
