



RAVEN'S EARLY CHILDHOOD CENTER ADMISSIONS FORM 2025-2026

Student Information

CHILD'S NAME: _____

DATE OF BIRTH: _____

NAME OF PARENT/GUARDIAN: _____

HOME PHONE: _____

WORK PHONE: _____

IN CASE OF EMERGENCY CONTACT PARENTS

Family Doctor _____

/or _____ PHONE _____

Office Phone _____

Primary Contact Number _____

Medical Insurance Plan No:

Emergency Contact Information

Please list all persons responsible for picking up your child and persons to contact in case of an emergency:

Name	Address	Phone	Relationship to Parent

Please note – Parents must call the center to notify us if anyone else other than the names mentioned will be picking up your child/children. If someone is being sent they must present a government identification card at the front desk.



Medical/Allergy Form

Student Information

Child's Name: _____

Date of Birth: _____

Name of Parent/Guardian: _____

Home Phone: _____

Work Phone: _____

IN CASE OF EMERGENCY CONTACT PARENTS

Family Doctor _____

/or _____ PHONE _____

Office Phone _____

Primary Contact Number _____ **Medical Insurance No:** _____

A. Please note any health problems, physical handicap, emotional difficulty, behavioral problems, or facts which may limit full participation in school/gym activities.

B. Students' immunization shots are current, i.e... Tenants and diphtheria, typhoid, smallpox, and polo vaccine.

YES () NO ()

c. Student is subject to:

__ asthma __ sensitive skin __ anemia __ nosebleed

__ earache __ sinus trouble __ seizures __ high blood pressure

__ fainting __ frequent colds __ headache __ motion sickness

__ tonsillitis __ sickle cell __ diabetes __ eye infection

__ bronchitis __ kidney problem

Allergies(Describe/List) _____

D. Student wears contact lenses:

YES () NO ()

CONTRACT OF PAYMENT

I, _____ the parent/guardian of _____ pledge and promise to cooperate with the rules and regulations of Raven's Early Childhood Center and I shall pay all fees charged in the name of my child/children in attendance.

Registration Fee:

- Infant/Toddler - (Ages 1-2): \$250
- Nursery School (Ages 2-3): \$280

Tuition Fees:

CLASS	AGE GROUP	MONTHLY RATES
Infants	10 months to 1 year old	\$1,400/month
Toddlers	1 - 2 years old	\$1,300/month
Nursery School	2 -3 years old	\$1,200/month
3K and UPK	4-5 years old	FREE Tuition

1. Monthly – Tuition Payments are due on the 1st through the 8th of each month. A late fee will be applied after the 8th of the month for all late tuition payments.

Late Fee: \$25.00 applied after the 8th of each month for late tuition.

Emergency Closings

Notifications will be provided via:

In the event of severe weather or natural disaster, you will be notified of the school's hours or closings via Channel 12 News, email phone call.

Early Withdrawal Policy

We must receive in writing , one month prior to a student withdrawing mid-year, the anticipated withdrawal date. All tuition and fees must be paid in full until said date in order for us to return your security deposit of \$100.00 to you. Failure to do so will not only be denied any sort of return and will be obligated and bind them to pay the balance of the year's tuition. There will be NO EXCEPTION to this withdrawal policy.

Initial _____

Tuition/Fee Payments and General Policies:

Please sign at the end of each policy to indicate that you have read and agree with the policy.

Tuition Policy:

The school year is from the First Day of School in September to the Last Day of School in June, as reflected on the school Calendar. Parent(s) agrees to pay tuition and fees for your child for the entire School year (or, if your child is starting after the First Day of the School Year, from the starting dated as agreed in writing with us) through the Last Day of School. You may pay tuition in any payment plan reflected as an option. In addition to the tuition and fees set forth in the Tuition and Fee Schedule, you will pay for any extra charges incurred by your child for care or activities which are applicable.

Tuition and fee payments are due and payable at the times stated in your chosen payment plan. Tuition and Fees are considered delinquent at 7:30 a.m. on the day following the due date.

Parent's Signature

Date

Late Payment Policy

If the Parent(s) tuition payment is delinquent by the Payment Deadline specified by this Contract, the Parent(s) will be charged as late fee of \$25.00. If tuition and any other outstanding charges are not paid within seven (7) days of the due date (or within three days of notification to you, in the case of a returned check), the student may be denied admission and his or her enrollment may be terminated, until tuition is paid in full for the past due amount and for the current period. Terminate of the Student for delinquent tuition payments does not terminate Parent (s) payment obligations under this Contract. No progress reports, teacher evaluations, and/or transcripts will be released until the school receives all payments due under this contract.

Parent's Signature

Date

Trip Permission Slip

Our center plans to make field trips at least once per month. We hope to use these trips as learning experiences, to reinforce areas of the curriculum presented to your child/children as part of their class activities. If you give your child permission to go with us (at the specified times) please complete the slip below.

PARENTS ARE WELCOME ON CLASS TRIPS

I, _____ give permission for my child, _____ to attend field trips organized by Raven's Early Childhood Education Center.

I also give permission for my child _____ to travel on a hired school bus. I understand that all safety precautions will be observed. I am willing to accompany the school on trips whenever I am available.

LUNCHES ARE REQUIRED FOR ALL TRIPS

Parent/Guardian Signature: _____

Date: _____