

Please complete one form for each child you are registering.

Child Name:							
Age:	DOB:		Male				
			Female				
Address:		City:	State:	Zip:			
Parent/Guardian Name:			Phone:				
Parent/Guardian Email:							
Address (if different from cl	nild's):						
Parent/Guardian Occupation	า:						
Parent/Guardian Name:			Phone:				
Parent/Guardian Email:							
Address (if different from child's):							
Parent/Guardian Occupation	ו:						

Emergency Contacts

Parent or Guardian will always be called first, however your emergency contact MUST be able to reach the school within 20 minutes in the event you cannot pick up your child.						
Emergency Contact (other than parent/guardian)	Relationship	Ph	one			
		Home:	Cell:			
		Home:	Cell:			

Family Physician	Phone
Family Dentist	Phone
	Flidile



Child Information

Child Name:		
Name and Age of All Siblings:		
Primary or other Languages	YES	NO
Do you or your children speak another language besides English?		
Do you or your children speak another language besides English?		

Please List Any Known Allergies: *			
1.			
2.			
3.			
4.			
5.			

*Prior to the start of school any child with allergy must have an allergy plan signed by the parent/guardian and the physician. Please come to the office if you need a blank form.

Please answer the following questions:	YES	NO
Has your child had any previous school experience?		
Has your child ever qualified for <i>Early Intervention</i> ?		
Is your child currently receiving any special services such as occupational therapy, physical therapy, speech therapy?		
Has your child ever received any special services in the past?		
If you answered yes to any of these questions, please explain below:		

Registration 2024/2025 School Year

Child Name:
Do you have any additional comments that would help us better understand your child? (If you
need more space, please use the back of this page.)
How Did you hear about LEAP? (Check all that apply)
Through a friend (who shall we thank?):
Advertisement (where):
Social Media:
Other (Please explain):

Select the program that best suits your family

2.5-year-old classes							
1 st	2 nd	Days	Time	*Annual	10 payments of:		
Choice	Choice			Tuition			
		Tues/Thurs	9am-11:30am	\$3450	\$345		
		Mon/Wed/Fri	9am-11:30am	\$4850	\$485		
		3-year	-old classes				
1 st	2 nd	Days	Time	*Annual	10 payments of:		
Choice	Choice			Tuition			
		Mon/Wed/Fri	9am-12pm	\$4650	\$465		
		Tues/Thurs/Fri	9am-12pm	\$4650	\$465		
		Monday-Thursday	9am-12pm	\$5850	\$585		
		4-year	-old classes				
1 st	2 nd	Days	Time	*Annual	10 payments of:		
Choice	Choice			Tuition			
		Monday - Thursday	9am-12pm	\$5850	\$585		
		Monday - Friday	9am-12pm	\$6950	\$695		
Transi	tional Kinde	rgarten – "TK" schedul	<mark>e is 2 full days an</mark>	d 3 half days	s (5 days/week)		
		(Children in this progra	m must be 5 by Oc	tober 1 st)			
	Days Time *Annual 10 payments of Tuition						
		 Mon/Wed/Fri 	• 9am-2:30pm	\$8450	\$845		
		 Tues/Thurs 	• 9-12pm				

*\$100 discount on the annual total paid prior to September.



Lunch Bunch

Lunch bunch provides children the opportunity to share lunch with their friends. Parents/Guardians provide their child with a **peanut & nut free lunch and drink** in an insulated lunch bag.

You may register at any time subject to availability. Space is limited.

Child Name:				
	30 Min L	unch Bunch for 2	.5 year old classes only	
30 min	Number of Days	Time	Please mark the days your child will attend Lunch	Monthly Payment
	1 day/week	11:30am-12pm		\$48/month
	2 day/week	11:30am-12pm		\$65/month
	3 day/week	11:30am-12pm		\$82/month
Drop in (an	y child can drop in <u>v</u>	vith 24 hrs. notice	provided space is available)	\$26/day

	1 Hour Lunch Bunch for <i>3, 4 & 5 year old</i> classes only						
1 hour	Number of Days	Time	Please mark the days your child will attend Lunch	Monthly Payment			
	1 day/week	12pm-1pm	□ M □T □W □TH □ F	\$68/month			
	2 day/week	12pm-1pm	□ M □T □W □TH □ F	\$110/month			
	3 day/week	12pm-1pm	□ M □T □W □TH □ F	\$150/month			
	4 day/week	12pm-1pm		\$183/month			
	5 day/week	12pm-1pm		\$215/month			
Drop in (a	ny child can drop in I	with 24 hrs. notic	e provided space is available)	\$38/day			

	2 Hour Lunch Bunch for <i>3, 4 & 5 year old</i> classes only						
2 hours	Number of	Time	Please mark the days your	Monthly Payment			
	Days		child will attend Lunch				
	1 day/week	12pm-2pm	□ M □T □W □TH □ F	\$105/month			
	2 day/week	12pm-2pm	□ M □T □W □TH □ F	\$161/month			
	3 day/week	12pm-2pm	□ M □T □W □TH □ F	\$216/month			
	4 day/week	12pm-2pm	🗆 M 🗆 T 🗆 W 🗆 T H 🗆 F	\$275/month			
	5day/week	12pm-2pm	🗆 M 🗆 T 🗆 W 🗆 T H 🗆 F	\$337/month			
<u>Drop in</u> (a	any child can drop in	with 24 hrs. notice	provided space is available)	\$43/day			

	2.5 Hour Lunch Bunch for <i>3,4 & 5 year old</i> classes only						
2.5 hours	Number of	Time	Please mark the days your	Monthly Payment			
	Days		child will attend Lunch				
	1 day/week	12pm-2:30pm	🗆 M 🗆 T 🗆 W 🗆 T H 🗆 F	\$127/month			
	2 day/week	12pm-2:30pm	🗆 M 🗆 T 🗆 W 🗆 T H 🗆 F	\$202/month			
	3 day/week	12pm-2:30pm	🗆 M 🗆 T 🗆 W 🗆 T H 🗆 F	\$256/month			
	4 day/week	12pm-2:30pm	🗆 M 🗆 T 🗆 W 🗆 T H 🗆 F	\$299/month			
	5day/week	12pm-2:30pm	🗆 M 🗆 T 🗆 W 🗆 T H 🗆 F	\$352/month			
Drop in (an	y child can drop in <u>v</u>	vith 24 hrs. notice	provided space is available)	<i>\$51/day</i>			



Tuition Payments:

Upon registration a non-refundable registration fee of **\$135 per child is due**.

A non-refundable deposit equal to 1/10th of full annual tuition is due no later April 1, 2024.

Below is the schedule of Tuition Payment Due Dates:

1.	April 1, 2024(1 st payment/deposit)
2.	September 1, 2024
3.	October 1, 2024
4.	November 1, 2024
5.	December 1, 2024
6.	January 1, 2025
7.	February 1, 2025
8.	March 1, 2025
9.	April 1, 2025
10.	May 1, 2025

Tuition payments are non-refundable once paid. Tuition rates are annualized and broken up into 10 payments for your convenience. You are free to pay the full amount at any time. **Full annual tuition paid before September 1st is discounted \$100.00.**

Lunch bunch and other added classes are billed at the beginning of each month (for that month) and are non-refundable once paid.

There are no reimbursements for snow days, days out sick, other unexpected or planned absences including vacations. This includes but is not limited to COVID-19 closures or unexpected community or state mandated closures.

Siblings attending LEAP Preschool, LLC <u>during the same school year</u> receive a 10% discount on tuition (discount is applied to the lower tuition rate and does not apply to before care, lunch bunch or additional services).

Please make checks payable to LEAP Preschool, LLC. We also accept all major credit cards, cash and offer **autopay through Tuition Express** (upon request, a link will be sent to you to set up your account).

I certify all the information I have provided is true and I understand the terms of tuition payment and class placement.

Parent/Guardian Signature:	Date:
Child Name:	
Parent/Guardian Name:	