

# Montessori Center of Downriver

## Policy Agreement and Permission Form

**Please initial each box indicating that you agree to the stated policy**

**Admittance Policy:** We are a non-discriminatory center. We do not screen children in regard to individual academic abilities, religion, or ethnic origin.

We will need the following forms completed and returned to our office *at least one week before the first day of attendance:*

**Child Information Record**

[https://www.michigan.gov/documents/lara/lara\\_BCAL\\_3731\\_Child\\_Information\\_Record\\_062315\\_492679\\_7.pdf](https://www.michigan.gov/documents/lara/lara_BCAL_3731_Child_Information_Record_062315_492679_7.pdf)

**Health Appraisal Form**

[https://www.michigan.gov/documents/dhs/BCAL-3305\\_09\\_10\\_336837\\_7.pdf](https://www.michigan.gov/documents/dhs/BCAL-3305_09_10_336837_7.pdf)

Your child must have received the following immunizations: DPT, Polio, HIB, Hepatitis B, MMR, Varicella, and Pneumococcal. A record of your child's immunizations should be attached to the Health Appraisal Form. If you choose to waive any of the above immunizations, a Michigan Immunization Waiver form must be obtained from the local health department after the parent/legal guardian attends an immunization education class (as required by the state).

I will pay the yearly tuition in full.  
OR

I understand that I am enrolling my child for the school year term. I authorize nine additional payments to be withdrawn from the account on my Tuition Express Authorization Form. Payments are due on the first day of each month from September through May. <https://s3.amazonaws.com/cdn.procaresoftware.com/pdfs/Tuition-Express/Tuition-Express-Parent-Authorization.pdf>

**I understand all payments are non-refundable and non-transferable.**

I understand that I am entering into a school-year-long contract and am agreeing to pay the nine remaining installments and that these payments will be withdrawn from the account listed on my Tuition Express Authorization Form. If during the year, your family must move or encounters other such extenuating circumstances, please contact the office about being released from your contract.

I understand that policy changes are required from time to time. Minor changes will be emailed and/or sent via the Procure app.

**Absences:** There will be no refunds or credits given for days missed due to illness, holidays, vacations, inclement weather, or emergency school closings.

**Record Requests:** Your child's academic and health records may be requested in writing. The Montessori Center of Downriver reserves the right to deny the request for those individuals having a balance on their account at the time of the request.

**Lunch Policy:** Parents provide lunch daily for the Full Day and Daycare Children. We do not have the facilities to heat children's lunches. Please include an ice pack for cold lunches. You may send hot food in a thermos.

**Late Policy:** I understand that any late pick up will incur a \$10 late fee and \$1.00 for every minute thereafter.

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I understand that the Montessori Center of Downriver does not have the right to withhold my child from any parent having custody or joint custody. If there is a current court order stating that one parent may not have access to a child, the school must have a copy on file. MCOB cannot deny any parent access to their child without such an order.

**Please initial each box that you agree to give permission for:**

My child/ren to use all indoor and outdoor play equipment

Staff to photograph my child/ren at the Montessori Center of Downriver. These photos (without names) to be used in the parent newsletter

Staff to apply sunscreen/insect repellent that I will provide

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

Parent or Legal Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

**You can access all other policies in our parent handbook, which is available at**

<https://www.montessoridownriver.com>