



Lotus Montessori

Admission Agreement

2410 San Ramon Valley Blvd #100, San Ramon, CA 94583

925-854-2520 | www.lotusmontessoripreschool.com | admin@lotusmontessoripreschool.com

Child's Name: _____

Welcome to Lotus Montessori (LM)! This agreement and our Parent Handbook comprise our rules and policies. You must read and understand this agreement and the handbook, and agree to comply with them. If you have any questions, please contact us.

Enrollment Procedures and Requirements

- ☐ Complete Application Form and pay \$100 Annual Registration Fee
- ☐ Read Parent Handbook and fill out Child Profile
- ☐ Complete and submit enrollment forms as indicated on pages 8-9 of the Parent Handbook: LIC 995, LIC 613A, LIC700, LIC 627, LIC 702, LIC 701, Immunization Record, and Needs and Services Plan (if applicable)
- ☐ Read, complete Schedule Request Form and sign this Admission Agreement
- ☐ Complete and sign Contact Sharing Consent Form
- ☐ Complete and sign Picture and Video Consent Form
- ☐ Complete and sign Non-Prescription Medication Form

----- FOR OFFICE USE -----

Enrollment date: _____ 1st day of attendance: _____ ☐ Female ☐ Male
Program (circle): Full School AM PM Days (circle): 5 3 2 Tuition: _____



Schedule Request Form

Find your child's age group below and check one box and circle your preferred schedule.

6 weeks – 12 months (Infants)

- ☐ 5 Days / Week: Full Day (\$2,200) School Day (\$2,000) AM/PM (\$1,850)
- ☐ 3 Days / Week: Full Day (\$1,950) School Day (\$1,850) AM/PM (\$1,650)
- ☐ 2 Days / Week: Full Day (\$1,700) School Day (\$1,660) AM/PM (\$1,450)

12 – 24 months (Toddlers)

- ☐ 5 Days / Week: Full Day (\$1,900) School Day (\$1,700) AM/PM (\$1,550)
- ☐ 3 Days / Week: Full Day (\$1,650) School Day (\$1,550) AM/PM (\$1,350)
- ☐ 2 Days / Week: Full Day (\$1,400) School Day (\$1,300) AM/PM (\$1,150)

 **24 – 36 months (Transition)** * Note: Subject to an additional \$100/mo potty training fee if applicable.

- ☐ 5 Days / Week: Full Day (\$1,800) School Day (\$1,600) AM/PM (\$1,450)
- ☐ 3 Days / Week: Full Day (\$1,550) School Day (\$1,450) AM/PM (\$1,250)
- ☐ 2 Days / Week: Full Day (\$1,300) School Day (\$1,200) AM/PM (\$1,050)

36+ months (Primary / Preschool)

- ☐ 5 Days / Week: Full Day (\$1,500) School Day (\$1,300) AM/PM (\$1,150)
- ☐ 3 Days / Week: Full Day (\$1,250) School Day (\$1,150) AM/PM (\$950)
- ☐ 2 Days / Week: Full Day (\$1,000) School Day (\$900) AM/PM (\$750)

Schedule Hours Reference Chart

- ☐ Full Day Hours: 8:00 AM – 6:00 PM
- ☐ School Day Hours: 8:00 AM – 3:00 PM
- ☐ AM / PM Hours: 8:00 AM – 12:00 PM OR 12:00 PM – 4:00 PM

Add-On Care Options (Optional)

- ☐ I am interested in Early Drop-Off / Late Pick-Up (Outside of 8 AM – 6PM).
Please send rates.
- ☐ I am interested in After-School Daycare (For Pre-K and Kindergarten students).



Lotus Montessori Policies

Please initial next to each policy, indicating that you have read and agree to it.

_____ Basic Services

LM is licensed under the California Department of Social Services to provide developmentally appropriate preschool and kindergarten programs under the Montessori method for children ages 2 to 6 years. LM is open on a year round basis, Monday through Friday from 8:00am to 6:00pm. LM is closed for Spring Break (one full week in April/according to SRVUSD), Memorial Day, Independence Day, MLK Day, President Day, Labor Day, Thanksgiving Day, Black Friday, and Christmas Break (Christmas Eve through New Year's Day). No optional services are offered.

_____ Registration and Re-enrollment

An initial registration fee (\$100) is due upon acceptance into the program. I understand that each following year, continuing families must include an annual re-registration fee. These fees are non-refundable.

_____ Enrollment Forms

I agree to fully complete and provide all forms and documents indicated above and in the parent handbook that are required for enrollment to LM. Failure to complete the forms and documents required during the enrollment process will result in termination of services.

_____ Financial Responsibility

Please provide responsible Parent's Full Name: _____

I wish to enroll my child in the LM program indicated on the Schedule Request Form above, and I agree to pay monthly tuition of \$_____ which is due on the first day of each month. Tuition rates may change each year with a minimum of 30 days notice. Preferred method of payment is either cash or check or Zelle transfer. Once tuition payments are made, they are considered non-refundable.

Tuition payment is considered overdue after the 1st day of the month and may be subject to late fee. If tuition is not paid in full by the end of that month, the child will be denied admittance to the center until both the delinquent and current tuition is paid in full. Accounts in arrears may result



in disenrollment and the outstanding account balance referred to a collection agency.

Absentee Policy

I understand that I am responsible for the full payment of tuition every month, whether or not my child attends the full month. This includes situations such as holidays, vacations, illness, emergency leave, or any other reason.

LM considers half tuition for a child's illness if the child is absent more than 3 weeks and has a physician's note. There is no absentee credit or "make up days" for the above situations. LM parents have to pay their monthly tuition to guarantee their child's spot on the LM roster.

Holiday Policy

I understand that I have to pay full tuition for my child during the months with LM holidays (Spring Break, Memorial Day, Independence Day, MLK Day, President Day, Labor Day, Thanksgiving Day, Black Friday, and Christmas Break).

Late Pick Up Fees

I understand that the LM policy states that a parent pays a fee of \$1.00 (per child) every minute after the program end time (i.e. a child in full day program picked up at 6:05 PM will result in a \$5.00 late fee or a child in a AM program picked up at 12:07 PM will result in a \$7.00 late fee). Parents or designated representatives will be required to mark this on the sign in/out sheet which documents occurrences of late pick up. Parents will be charged late pick up fees in the month following the occurrence.

Repeated instances of late pickup may be the grounds for disenrollment.

*Note: If my child is left at childcare longer than two hours past the scheduled closing time without contact to LM and if LM has exhausted all emergency options from my emergency card, then the San Ramon Police Department will be contacted. At that time my child will be the responsibility of the San Ramon Police Department.

Insufficient Funds

If a payment for fees or tuition is made via a personal check and the check is returned by the bank due to insufficient funds, a \$25.00 return check fee will be added to your account with LM.



Withdrawal Policy

I understand that I have to give at least 4 weeks of notice before withdrawing a child from LM's program or else I will have to pay full tuition for that month. If it is an emergency, as a courtesy with reasonable proof, LM will consider half tuition for that month but will not give any guarantee towards holding a spot for a child on the LM roster.

Sign In/Out

I agree to sign my child in and out each day of attendance with my full legal signature as represented on the Emergency Contact Form. When I arrange for someone other than myself to pick up my child, I will notify LM and indicate their name as an authorized Family Representative on the appropriate LM Emergency Contact Form. When requested, individuals authorized to pick up the child must present their photo ID.

Attendance

I will notify LM by 8:30 AM if my child will be absent for any reason.

Age 2-3 Toilet Training

LM will start toilet training in the toddler program. I understand that I need to provide diapers if my child is 2-3 years old. When a child is ready for toilet training, LM teachers will have a meeting with me and provide me with all the toilet training information.

Sick Children

LM teachers conduct a daily health check prior to accepting your child and will not allow a sick child to stay in the program. Children must be symptom and fever free without medication for 24 hours before attending the program. Keep children home if they present with the following: communicable illness/disease, fever, diarrhea, or vomiting within the previous 24 hour period.

Medical Care

I consent to have my child treated by a physician for medical and surgical care in case of an emergency. I understand that every reasonable effort will be made to contact me or my emergency contacts before such action is taken. I also agree that in case of injury to my child requiring medical attention and hospitalization, insurance will be used to pay any expenses connected with that injury.

Field Trips



Currently, LM does not offer any field trips. We will notify the parents with full details well in advance when these services are introduced in the future.

_____ Refrain from Religious Instruction

LM refrains from religious instruction or worship.

_____ Open Door Policy – Unlimited Access

LM maintains an open door policy. All parents who have a child enrolled in one of Lotus Montessori's programs have unlimited access to their child(ren) and to all written records concerning their child(ren) during normal hours of operation and whenever the child(ren) is(are) in the care of LM.

_____ Parent Responsibilities

I agree as a parent to participate in activities coordinated by the Parent Advisory Committee. Parents are always welcome visitors and are expected to engage in family activities whenever possible.

_____ Privacy Policy

LM values privacy and wants to be sure that it protects information concerning its families. LM may access my child's records and health information for program purposes. I understand that the California Department of Social Services Community Care Licensing Division has the right to interview children and review children's files without the permission of parents under California regulation (section 101200).

_____ Dismissal Policy

I understand that if I do not adhere to the LM Admission Agreement and/or LM Parent Handbook, LM staff will make every effort to work with me in resolving the issue. It is LM's goal that all children remain in the program until they reach kindergarten age. However, I understand that LM reserves the right to discontinue services if the parent/legal guardian continues to violate the agreement and policies.

_____ Modifications to Admission Agreement

I understand that LM reserves the right to modify this admission agreement. These modifications to this agreement will be given to me in writing and will require me to read, sign and date as an acknowledgment of the changes. All changes will go into effect 30 days after release of the modifications.



Receipt of the Parent Handbook

LM's Parent Handbook is an important part of the coordination between the program and home. My signature at the end of this document indicates that I have received, read, and understand LM's Parent Handbook.

Updating Emergency Information

It is important that LM maintains current and accurate records for each child so that parents can be contacted in the event of an emergency. I understand that as the parent, it is my responsibility to make sure that LM has current contact information. If there are any changes to this information, I must notify LM so that they can update their records.

I hereby release from all liability and indemnify Lotus Montessori, its owners, agents, volunteers, and employees from any and all liability, claims, judgements, costs or expenses, including attorney fees for any injury, illness, or damage resulting from my child's enrollment. I have read and agree to these policies listed above and in the LM Parent Handbook. I will keep in my possession a copy of this Admission Agreement, Parent Handbook, and all other policies and agreements provided by LM.

Parent/Legal Guardian Full Name

Parent/Legal Guardian Signature

Date

Supervisor Signature

Date



Contact Sharing Consent Form

Lotus Montessori (LM) staff shares family information within the school community to allow families to contact each other directly for the purposes of volunteering, play dates, birthday parties, etc. LM does NOT share this information with any third party entities unless you provide written consent asking us to share specific information about you or your child (e.g., to an elementary school or health organization).

I, (parent name) _____, do hereby grant or deny Lotus Montessori permission to use my family's personal information as marked by my selection below. Personal information includes the name, address, phone number, and parent emails.

- ☐ Grant use of my family's personal information
- ☐ Deny use of my family's personal information

Parent/Legal Guardian Signature

Date



Photo and Video Consent Form

Lotus Montessori (LM) takes photos and videos of your child during class time, outdoor play, special events, and performances. We share these pictures by displaying them inside the classroom, on school bulletin boards, newsletters, the school website, school Facebook page, school Instagram page, and similar school social media websites to promote LM and the Montessori Philosophy.

I, (parent name) _____, do hereby grant or deny Lotus Montessori permission to use (child name) _____'s photos and videos as marked by my selection below. Photos and videos will be displayed inside the classroom, on school bulletin boards, newsletters, the school website, school Facebook page, school Instagram page, and similar school social media websites.

☐ Grant use of my child's photos and videos

☐ Deny use of child's photos and videos

Parent/Legal Guardian Signature

Date



Non-Prescription Medication Form

Child's Name: _____ Date: _____

I authorize my child care provider, Lotus Montessori, to use the following products on my child according to the manufacturer or physician's written instructions. I will not hold Lotus Montessori liable when the products are used according to these terms.

Parents are responsible for providing the following items. All items must be in the original container/packaging and clearly labeled with the child's name. These items include ointments, sunscreen, baby wipes, and etc.

Please list the name of the item, the brand name of the item, and any comments you may have. Please provide a copy of physician's written instructions if indicated.

1. Item Name: _____

Brand Name: _____

Comments: _____

2. Item Name: _____

Brand Name: _____

Comments: _____

3. Item Name: _____

Brand Name: _____

Comments: _____

* Please note that this form will need to be reviewed annually.

Parent/Legal Guardian Signature

Date