

LEARN AND PLAY SCHOOL

Website: <u>www.LAPMS.com</u> Email: <u>moraga@lapms.com</u>

1695 Canyon Rd, Moraga, CA 94556

Phone: (925) 376-8280

□NEW E	enrollment Dre-enrollmei	NT SCHEDULE CHANGE	□TRANSFER
Full Legal Name of Student:		Date of Birth:	
ender: Male□ Female□ Today's Date:		Start Date:	
Application Fee: \$100 non-re	efundable registration and pro	cessing fee.	
Annual Material Fee: \$400 n	on-refundable. Material Fees v	vill not be prorated.	
First Choice of Days: M T W TH F		Second Choice of Days: M T W TH F	
Toddler Program (18 Months to 24 Months) *Minimum 2 days per week		Two's, Preschool Program (2 years to 3.5 years) *Minimum 2 days per week	
(8:00 AM - 5:00 PM)	(8:30AM - 12:00PM) □5 days a week (\$1150 monthly)	(8:00 AM – 5:00 PM) □5 days a week (\$2175 monthly)	(8:30 AM – 12:00 PM) □5 days a week (\$1080 monthly)
□5 days a week (\$2300 monthly)	, ,,		, , , , , , , , , , , , , , , , , , , ,
□4 days a week (\$1880 monthly)	□4 days a week (\$945 monthly)	□4 days a week (\$1800 monthly)	□4 days a week (\$880 monthly)
□3 days a week (\$1460 monthly)	□3 days a week (\$735 monthly)	□3 days a week (\$1380 monthly)	□3 days a week (\$685 monthly)
□2 days a week (\$1040 monthly)	$\Box 2$ days a week (\$520 monthly)	□2 days a week (\$980 monthly)	\Box 2 days a week (\$485 monthly)
Partial Program (9:00 AM – 3:00 PM)		Partial Program (9:00 AM – 3:00 PM)	
\Box 5 days a week (\$1690 monthly)		$\Box 5$ days a week (\$1610 monthly)	
\square 4 days a week (\$1380 monthly)		\Box 4 days a week (\$1320 monthly)	
\square 3 days a week (\$1050 monthly)		$\square 3$ days a week (\$1025 monthly)	
□2 days a week (\$720 monthly)		\Box 2 days a week (\$710 monthly)	
	Pre-K, TK Program ((3.5 years to 4 years)	
		days per week and Partial Programs ONLY	
Full-Day Prog	ram (8:00 AM – 5:00 PM)	Morning Program (8:3	0 AM - 12:00 PM)
□5 days a week (\$2100 monthly)		□5 days a week (\$1000 monthly)	
□4 days a week (\$1740 monthly)		□4 days a week (\$840 monthly)	
□3 days a week (\$1330 monthly)		□3 days a week (\$655 monthly)	
Partial Progre	am (9:00 AM – 3:00 PM)		
\Box 5 days a week (\$155	0 monthly)		
\Box 4 days a week (\$126	0 monthly)		
\Box 3 days a week (\$960	monthly)		
MOTHER OR GUARDIAN		FATHER OR GUARDIAN	
Name		Name	
Home Address		Home Address	
City	tate Zip Code	City	State Zip Code
Email Address		Email Address	
Cell Phone Number		Cell Phone Number	
Alternative Phone Number		Alternative Phone Number	

Start Date: If the child does not start school with Learn and Play Moraga, Inc (the "School") on the start date given by the parent, the child's enrollment will be automatically dropped. The parent may choose to proceed with the enrollment on a different date and if the space is available, the parent can re-register but will be required to pay the registration fee again.

Student File: The student's file and orientation must be completed before the child's first day of school including the Physician's Report and Immunization Record. Without a Physician's Report and complete Immunization Record, a child will not be able to start, and tuition will not be prorated. If a Physician requires a TB test, the parent must provide the child's TB clearance before the start date.

Terms of Payment and Returned Payment Fee: Tuition fees are due on the 1st of each month and are late after the 5th of the month. We accept checks or Tuition Express. Checks are payable to LAPMS. A \$25 fee is charged on all checks returned by the bank or Tuition Express.

Late Payment: A late fee of \$25 will be charged for any late payments after the fifth of the month. Tuition with a late payment of \$25 must be submitted and cleared by the 15th of the month. The child's enrollment will be terminated if payment is not submitted by the 15th of the month.

Termination: The School reserves the right to terminate the enrollment of any child who in its judgment is not benefiting from the program due to the child's behavior or if a parent, parents, or quardians violate any school policies and procedures. No tuition refund will be given.

Credits/Refunds: No credit, refund, or make-up days are given for emergencies, absences, illness, vacations, or holidays. The School will not reserve a space for a child for any reason unless payment is submitted for the days of absence, vacation, or illness. The child will be re-enrolled if space is available. If the School or a classroom is shut down or must close due to circumstances beyond the School's control or as a result of a COVID-19 pandemic or other outbreak, in the School's reasonable discretion, no credits or refunds will be issued. Refunds are only provided for any prepaid monthly tuition to families who are asked to leave the school before the end of the month.

Before and After Pickup Charges: The School operates from 8:00 AM to 5:00 PM Monday through Friday. Children must be dropped off and picked up per their schedule. A flat fee of \$15 an hour will be charged for early drop-off and/or late pick-up. For children picked up after 5:00 PM there will be a \$15 per 15 minute late charge.

Holidays and Staff Development Days: The School is closed to all children on Labor Day, Veteran's Day, Thanksgiving (2 days), Christmas and Winter Break (See School Calendar), New Year's Day, Martin L. King Day, President's Day, Spring Day, Memorial Day, Juneteenth Day, Independence Day, Teacher's In-Service Day (See School Calendar), Parent Teacher Conferences (See School Calendar). The School reserves the right to make changes to the days off. The tuition will not be prorated.

Vacation: A 30-day written notice is required when a child goes on vacation for 10 consecutive business days or more. If you are returning from vacation that is more than two (2) months, the tuition, registration, and annual material fee will be required. If tuition is prorated, the school will not reserve space for your child unless tuition is paid for days of absence.

Withdrawal: A 30-day written notice is required to withdraw a child from the School. In case no notice or less than 30-day notice is given in writing to the School, one month's tuition is due. A 30-day notice is required from graduating students.

Tuition Changes: A yearly tuition increase is expected. A 30-day notice will be given to families for any tuition changes or program modifications.

Medical, Dental, And Related Expenses: The School will not be responsible for any medical, dental, optometry, or related medical expenses, including Ambulance expenses if the child gets injured at school. Parents or Guardians will be responsible for all medical, dental, and all related medical expenses.

Incidental Medical Services: You will be given a Plan of Operation clarifying school procedures in the administration of Epi-Pen and Nebulizer Medication.

State Licensing: The state licensing agency has the right to review child or facility records and files without prior consent. When necessary, the agency may interview a child or parent with or without permission from the School.

Pandemics/COVID-19: COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. The School has put in place preventative measures to reduce the spread of COVID-19 and other infectious diseases based on the guidance, orders and regulations of the CDC and State and local government agencies; however, even with such measures in place, we cannot guarantee that you or your child(ren) will not become infected.

BY SIGNING THIS AGREEMENT, I ACKNOWLEDGE THE CONTAGIOUS NATURE OF COVID-19 AND OTHER INFECTIOUS DISEASES AND THAT I OR THE STUDENT MAY BE EXPOSED TO OR INFECTED BY SUCH DISEASES BY PARTICIPATING IN THE SCHOOL PROGRAMS AND THAT SUCH EXPOSURE OR INFECTION MAY RESULT IN PERSONAL INJURY, ILLNESS, PERMANENT DISABILITY, OR DEATH. I UNDERSTAND THAT THE SCHOOL STAFF HAVE DIFFICULT JOBS TO PERFORM, AND WHILE THEY SEEK SAFETY, THEY ARE NOT INFALLIBLE. I UNDERSTAND THAT THE RISK OF BECOMING EXPOSED TO OR INFECTED BY SUCH DISEASES MAY RESULT FROM THE ACTS, OMISSIONS OR NEGLIGENCE OF THE SCHOOL STAFF OR OTHERS. I VOLUNTARILY ASSUME SUCH RISKS ON BEHALF OF MYSELF AND THE STUDENT AND HEREBY AGREE AND COVENANT TO RELEASE, INDEMNIFY, HOLD HARMLESS, DEFEND (AND NOT TO SUE) THE SCHOOL AND/OR ITS STAFF OR VOLUNTEERS FOR ANY CLAIMS, DAMAGES, LOSSES, EXPENSES OR LIABILITIES ARISING OUT OF OR RELATED TO ANY EVENT OR OCCURRENCE, INCLUDING NEGLIGENCE, RESULTING IN THE SPREAD OF THE COVID-19 VIRUS OR OTHER INFECTIOUS DISEASES TO ME OR THE STUDENT.

I have read, understand, and agree to all of the terms and conditions outlined in this contract.

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Approved by Parent or Guardian	Date	School Director's Signature	Date
	Moi	raga License	
		Page 2 or 2	
	Applicat	ion Version 5/9/2024	