

Student's Name \_\_\_\_\_

Student's Class \_\_\_\_\_

## **MONTVIEW COMMUNITY PRESCHOOL AND KINDERGARTEN PARENT COOPERATIVE CONTRACT**

I agree to pay the monthly tuition fee by the 15<sup>th</sup> of each month (August through March) for the following month's class. I understand that the May tuition was paid in advance at the time of acceptance into the school, and that tuition for September is due on August 15<sup>th</sup>.

I agree to adhere to all tuition and payment policies as outlined in the Parent Handbook.

I understand I will be charged a late pick-up fee if I am more than 10 minutes late picking up my child.

I agree that I will provide the school with at least 30 days written notice of intent to withdraw my child from school. I understand that May's advance tuition payment and application and activity fees are non-refundable.

I will cooperate with the school in carrying out any parent cooperative requirements as set forth in the Parent Handbook. This includes but is not limited to set-up, clean-up, and take-down days; helping parent days in the classroom; and parent committee assignments.

I will participate in all school fundraising activities including the Carnival.

I understand that occasional field trips are planned in each classroom. I hereby give my consent for short, neighborhood walks under the supervision of my child's classroom teachers. For any additional field trips, I will receive advance notice and will be required to sign a field trip consent form in order for my child to participate. The mode of transportation for these field trips will be by cars driven by parents, city buses, or walking, depending on the nature of the field trip.

I hereby do \_\_\_ / don't \_\_\_ (please initial one) give my permission for my child to be photographed during normal, classroom activities while under the supervision of classroom teachers. Any photograph taken of my child will be used only for school purposes at Montview Community Preschool & Kindergarten, including but not limited to classroom portfolios, newsletters, bulletin boards, and classroom projects.

I will return all health forms to the school by July 31st in order to hold my child's place in the school, and I understand that my child cannot attend class without the appropriate health forms on file.

I understand that the school reserves the right to drop a child, after a trial period, who does not fit into the school's program or whose parent does not cooperate with the school's policies.

I understand that the school reserves the right to change the child's classroom placement if it is deemed to be more appropriate for the child by the teacher and the director.

I will notify the school of any change in the information entered on any records.

***I acknowledge that I have received, read, and agree to follow the policies and procedures set forth in the Montview Community Preschool & Kindergarten Parent Handbook.***

\_\_\_\_\_  
**#1 Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**#2 Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

**\*Two signatures are required in two parent/guardian households.**