

# 4 YR - Preschool LEARNING EXPERIENCE 2021-2022

\*\*CHILDREN MUST BE 4 YEARS OLD BY DECEMBER 31, 2021 AND TOILET TRAINED\*\*

	<b>MONDAY, WEDNESDAY &amp; FRIDAY</b>	
	<input type="checkbox"/> 9:00 - 12:00 pm (3 hr)	<b>\$385/month</b>
	<b>TUESDAY &amp; THURSDAY</b>	
	<input type="checkbox"/> 8:45 - 11:45 am (3 hr)	<b>\$260/month</b>
* 3/4 yr olds	<b>MONDAY/WEDNESDAY</b>	
	<input type="checkbox"/> 12:30-3:00 pm (2 ½ hr)	<b>\$222/month</b>
*NEW*	<b>ONE CLASS, TWO OPTIONS:</b> CHOOSE either a 2 day <u>or</u> 3 day program 12:30-3:30 (3 hr)	
	<input type="checkbox"/> TUESDAY/THURSDAY	<b>\$260/month</b>
	<input type="checkbox"/> TUESDAY/WEDNESDAY/THURSDAY	<b>\$346/month*</b> Reduced Rate

\*\*\*SCHOOL STARTS THE FIRST WEEK AFTER THE LABOR DAY WEEKEND\*\*\*

**NOTE:** The June 2022 tuition + \$100 non-refundable Registration Fee is due at time of registration to reserve child's spot.

**DUE AT TIME OF REGISTRATION:**

- **Completed** Registration Form
- **\$100 Non Refundable Registration Fee**
- **JUNE 2022 Tuition** - prepaid at time of registration

\*\*NOTE: Withdrawal Policy on reverse -----> (over)

**MONTHLY TUITION PAYMENT (due by the 1<sup>st</sup> of every month):**

1. 9 post-dated cheques dated Sept. 1, 2021 to May 1, 2022 payable to 'Learning Experience'
2. CASH/CHEQUE/DEBIT OR EMAIL TRANSFER to [learningexperience@shaw.ca](mailto:learningexperience@shaw.ca)

**LATE PAYMENT POLICY:** You will be required to add a \$15 late charge to the tuition if not received by the 1<sup>st</sup> of the month.

**Alternatively you may:**

- \* Pay in Full: 9 months - September to May cheque dated: September 1, 2021
- \* Pay in 2 installments: 5 months (Sept-Jan) cheque dated: September 1, 2021  
4 months (Feb-May) cheque dated: February 1, 2022

**FAMILY DISCOUNT:** Only one registration fee and \$15 discount monthly.

**NOTE:** Learning Experience reserves the right to cancel or modify classes based on enrollment. If a class is cancelled, all fees will be fully refunded.

# Withdrawal Policy

- A MINIMUM ONE (1) MONTH WITHDRAWAL NOTICE is required by the 1<sup>st</sup> of the month prior to the month leaving. The tuition deposit will be refunded if the required notice is given. Failure to provide proper notice will result in NO REFUND
- EMAIL NOTICE TO: [learningexperience@shaw.ca](mailto:learningexperience@shaw.ca)

IF you are withdrawing before school starts September 1, written notice is required BY August 1, 2021.

IF you are withdrawing anytime during school ie. November 15, written notice is required BY October 1, 2021.

There are NO exceptions to this policy.

Note: We do not pro-rate monthly tuition fees for mid-month withdrawals.

## SCHOOL START DATES AND INFORMATION:

All classes will start the week after the September long weekend.

3<sup>rd</sup> week in August, you will receive a Welcome email containing:

- Teacher's name and classroom designation
- Parent Handbook (outlining our policies and procedures, ie. snacks, holidays, illness, arrival/pickup etc.



**OTHER INFORMATION:**

Names and Ages of brothers or sisters:

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Please provide any information that you may be concerned with ie. speech, development, shyness, behavioural:

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LANGUAGE SPOKEN AT HOME: \_\_\_\_\_

IF NOT ENGLISH, DOES YOUR CHILD SPEAK/UNDERSTAND ENGLISH:

YES  (Understands and speaks well)      VERY LITTLE  (Has very basic/limited English skills)      NO  (Not at all)

**Is child toilet trained and able to communicate their need to go to the washroom/manage their hygiene needs?**

Yes       In Progress  \* Children are expected be toilet trained by the beginning of September.

**\*\*AIDED/SUPPORTED CHILDREN INFORMATION (IF APPLICABLE)**

If your child will be attending with an Aide, please list the Agency and contact person you are working with:

If your child is currently being assessed or will be, please provide details:

**CUSTODIAL INFORMATION (IF APPLICABLE):**

**IF PARENT'S LIVE APART: PLEASE PROVIDE NON-RESIDENT PARENTS' NAME AND ADDRESS:**

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IS THERE A COURT/PARENTAL RESTRICTION ORDER IN PLACE?    YES     NO     **IF YES - PLEASE PROVIDE A COPY OF THE CUSTODY/PARENTAL RESTRICTION DOCUMENT AT TIME OF REGISTRATION.**

IF THE CHILD DOES NOT LIVE WITH EITHER PARENT ie; foster care/agency/relative. Please inform school office at time of registration and complete the following information:

GUARDIAN/AGENCY NAME \_\_\_\_\_ WORK #: \_\_\_\_\_ CELL #: \_\_\_\_\_

How did you learn about our school?    Personal Referral - Family Name: \_\_\_\_\_  
Community Newsletter                       Online                                       Street Sign

**\*\*I have read and understand the Withdrawal Policy and Late Payment Policy outlined in this document.**

PARENT SIGNATURE: \_\_\_\_\_                      DATE: \_\_\_\_\_

**NOTES:**



## **PRESCHOOL/CHILDCARE MEMORANDUM OF AGREEMENT**

**A MEMORANDUM OF AGREEMENT BETWEEN LEARNING EXPERIENCE, HEREAFTER KNOWN AS**

**'THE SCHOOL' AND \_\_\_\_\_, HEREAFTER KNOWN AS**  
**PRINT Parent's Name**

**'THE PARENT', ON THE ADMISSION OF THE PARENT'S CHILD \_\_\_\_\_**  
**PRINT Child's Name**

1. THE PARENT recognizes that their child's behavior must be appropriate in a classroom where each student respects the rights and privacy of others. The staff of THE SCHOOL will administer no punishment of any kind; redirection is the method used for child guidance. If a problem persists, THE SCHOOL reserves the right to cancel the child's enrollment.
2. THE PARENT understands and agrees that THE SCHOOL will not tolerate any type of verbal abuse or harassment of staff members. If a problem persists, THE SCHOOL reserves the right to revoke the child's enrollment at any time.
3. THE PARENT understands that if their child is ill and unable to participate in all school activities, he/she should not be sent to school. In the event the child is away due to illness/quarantine, there will be no refund issued to the PARENT for the duration of the absence.
4. THE PARENT gives permission for THE SCHOOL staff to seek medical attention without restriction as to scope or source for their child in the event of an accident or illness while in the care of THE SCHOOL. Any resulting costs shall be assumed by the parent. THE SCHOOL is permitted to administer prescription medication **only under specified conditions**.
5. THE PARENT gives permission for photographs or video recordings of their child to be taken while in the care of THE SCHOOL and used by THE SCHOOL (**internal use only**) for various purposes with or without prior knowledge.
6. THE PARENT recognizes that the monthly tuition must be received by the 1<sup>st</sup> of every month (cash, debit, cheque or email transfer). The parent agrees to add a **\$15 late penalty fee** to any tuition payments made after the 1<sup>st</sup> of the month.
7. THE PARENT agrees to pay a service charge of **\$20 for FIRST bank returned cheque and \$40.00 for all subsequent bank returned cheques.**
8. THE PARENT understands tuition fees will **not be waived** for families taking extended vacations/time away.
9. THE PARENT understands THE SCHOOL **Withdrawal Policy** as follows:  
A MINIMUM ONE (1) MONTH WITHDRAWAL NOTICE is required by the 1<sup>st</sup> of the month prior to the month leaving. The JUNE 2022 Preschool tuition deposit will be refunded if the required notice is given. Note: We DO NOT pro-rate monthly tuition fees for mid-month withdrawals. The Registration Fee is NON-REFUNDABLE.
10. THE PARENT agrees to read and understand the Learning Experience Parent Handbook outlining our policies and procedures.
11. THE PARENT understands that THE SCHOOL reserves the right to cancel or modify programs based on enrollment. If a program is cancelled all fees will be fully refunded.

**I, THE PARENT, acknowledge that I have read and understand all policies and procedures of Learning Experience as set out in this Memorandum of Agreement.**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE