PEGA TOTS PRESCHOOL REGISTRATION

FOR MORE INFORMATION CALL OR EMAIL: 541-929-2772 peakelitega@gmail.com

Peak Elite Gymnastics Academy 6880 SW West Hills Rd. Corvallis, OR 97333

*3 Year-Olds T/Th 9am-12pm \$205/Month** *4 Year-Olds T/W/Th 9am-12pm \$300/Month* <u>*Non-refundable Registration fee of \$150 is due at time of paperwork drop off</u>*

Registration is held when this form is completed and submitted with the registration fee. Tuition is due by the 15th of each month; a \$15 late fee is incurred after the 20th of each month.

Students Name:			
First	Middle	Last	
Nickname: (if applicab	le):		
Date of Birth:	Age:	Gender:	Male Female
T-shirt Size			
Is your child under any	type of medical su	pervision?	YN
Name allergy/allergies	and explain sympt	oms?	
 Child's Physician:		Phone:	
Address:			
Insurance Carrier:			
Policy #:			
Hav <mark>e you consulted a p</mark>	hysician or other p	rofessional	l regarding any of the
following?			
Speech and language d	evelopment? Y N		
Physical development of	or coordination? Y	Ν	
If you answered yes to	any of the above, p	lease	
explain:			

Mother/Guardian Full	Name:	_
Address:		
Email:		
	Cell Phone:	
Employer:	Business Phone:	
Father/Guardian Full I	Name:	
Address:	Email:	
Home Phone:	Cell Phone:	
Employer:	Business Phone:	
If child is not living wi	th both parents/guardians, please indicate wi	th whom
the child resides:		
	lame:	
Phone number:	Relationship to child:	
Has your family attend	led another preschool? Y N	
	ne names of the school(s):	

<u>Please Note</u>: Every family must complete a tour meeting prior to enrollment. Enrollment applications along with a yearly registration fee must be submitted prior to confirmation of enrollment at PEGA Tots Preschool.

Enrollment will be confirmed once applications are reviewed, space for the class is determined and all application paperwork is confirmed. Upon enrollment students must pay the first and last month's tuition to confirm placement in the class.

PEGA Tots Preschool reserves the right to refuse enrollment to any student. Policies for enrollment will be upheld and are required to ensure a positive environment for every student attending. • I hereby grant permission for my child to use all of the play equipment and participate in all of the activities of the PEGA Tots Preschool at PEGA.

• I hereby grant permission for my child to be photographed and his/her likeness to be used on promotional materials related to PEGA Tots Preschool.

• I hereby grant permission for the teaching staff to take whatever steps may be necessary to obtain emergency medical care if warranted. These steps may include but are not limited to the following:

- 1. Attempt to contact a parent or guardian
- 2. Attempt to contact the child's physician
- 3. Attempt to contact you through any of the persons listed on the emergency information form you provided
- 4. If we cannot contact you or your child's physician we will do any or all of the following:
 - Call another physician or paramedics
 - Call an ambulance
 - Have the child taken to an emergency room (hospital) in the company of a staff member

5. Any expenses incurred under #4, above, will be borne by the child's family.

6. PEGA Tots Preschool will not be responsible for anything that may happen as a result of false information given at the time of enrollment.
7. PEGA Tots Preschool will not assume responsibility for a child' who has not been enrolled at PEGA Tots Preschool.

Mother/Guardian S	Signature:	Da	ate:

Father/Guardian Signature: _

Date:__

Before School Drop Off

We offer early drop off options if needed. You are able to drop your child off at 8:30 with an additional fee each month.

Tue & Thur early drop off: \$35 Tue, Wed & Thur early drop off : \$40

If you'd like to enroll in early drop off please sign below.

Parent/Guardian Signature: _____

Date: