



**WISHING WELL PRESCHOOL**  
 8026 Cook Riolo Road  
 Roseville, CA 95747  
 (916) 774-9474

FOR OFFICE USE ONLY	
FEE PAID	
AMOUNT PAID	
DATE	
CASH/CHECK #	
CLASS [AM/PM]	
START DATE	
PRORATED	

### ADMISSION AGREEMENT

#### REGISTRATION FEES

I HEREBY AGREE THAT (CHILD'S NAME), \_\_\_\_\_, WILL BE ENROLLED IN WISHING WELL PRESCHOOL.

RETURN OF THIS AGREEMENT WITH A NON-REFUNDABLE REGISTRATION FEE OF **\$185.00/NEW STUDENTS OR \$185.00/RETURNING STUDENTS**. MY SIGNING THIS ENROLLMENT AGREEMENT. (WHERE LEGAL CUSTODY OF THE ABOVE NAMED CHILD IS MAINTAINED BY MORE THAN ONE PARENT OR GUARDIAN, ALL PARENTS AND GUARDIANS MAINTAINING LEGAL CUSTODY OF, OR HAVING FINANCIAL RESPONSIBILITY FOR SAID CHILD, MUST SIGN THIS ENROLLMENT AGREEMENT IN THE APPROPRIATE SPACES.) ACCEPTANCE OF THIS ENROLLMENT AGREEMENT BY WISHING WELL PRESCHOOL, SUCH ACCEPTANCE TO BE SIGNIFIED BY EXECUTION OF THIS ENROLLMENT AGREEMENT BY AN AUTHORIZED REPRESENTATIVE OF WISHING WELL PRESCHOOL FOR THE EDUCATIONAL ENRICHMENT OF THE ENROLLED CHILD.

\_\_\_\_\_ (PLEASE INITIAL)

#### TUITION POLICIES

I UNDERSTAND THAT ACCEPTANCE OF ENROLLMENT CONSTITUTES AN AGREEMENT TO PAY THE MONTHLY TUITION BY THE FIRST (1ST) DAY OF EACH MONTH MY CHILD IS IN ATTENDANCE AT WISHING WELL PRESCHOOL. WISHING WELL PRESCHOOL IS ENTITLED TO BE REIMBURSED FOR ANY ATTORNEY'S FEES AND COSTS INCURRED IN THE COLLECTION OF ANY UNPAID BALANCE. IN ADDITION, IF I FAIL TO MEET MY FINANCIAL OBLIGATION TO WISHING WELL PRESCHOOL BY THE DEADLINE STATED ABOVE, I UNDERSTAND THAT WISHING WELL PRESCHOOL HAS THE ABSOLUTE RIGHT TO DENY CLASSROOM ATTENDANCE TO MY CHILD.

I AGREE TO PAY THE TUITION OF \$ \_\_\_\_\_ PER MONTH.

MY TUITION PAYMENT IS TO BE PAID ON A MONTHLY BASIS REGARDLESS OF THE NUMBER OF DAYS IN THE MONTH, BEGINNING OR ENDING SCHOOL MONTHS, OR HOLIDAYS. **AFTER THE FIRST DAY OF SCHOOL NEW STUDENTS ENROLLING ON THE 1ST THROUGH THE 15TH OF ANY MONTH WILL BE REQUIRED TO PAY THE FULL MONTH'S TUITION ON THEIR FIRST DAY OF ATTENDANCE. NEW STUDENTS ENROLLING ON THE 16TH THROUGH THE END OF ANY MONTH WILL BE REQUIRED TO PAY HALF OF THE MONTHLY TUITION AMOUNT ON THEIR FIRST DAY OF ATTENDANCE. ANY VACATION OR**

**EARLY WITHDRAWAL FROM ANY MONTH DOES NOT ALTER THIS AGREEMENT. THE COMPLETE TUITION WILL BE DUE FOR EVERY MONTH REGARDLESS IF VACATION TIME OR EARLY WITHDRAWAL OCCURS.**

I UNDERSTAND THAT TUITION IS DUE NO LATER THAN CLOSE OF BUSINESS ON THE THIRD (3RD) DAY OF THE MONTH THAT MY CHILD IS IN ATTENDANCE AT WISHING WELL PRESCHOOL. THERE WILL BE A FIFTY DOLLAR (\$50) LATE FEE IF TUITION IS PAID AFTER THE SIXTH (6TH) DAY OF THE MONTH THAT MY CHILD IS IN ATTENDANCE AT WISHING WELL PRESCHOOL.

I UNDERSTAND THAT I AM JOINTLY AND SEVERALLY RESPONSIBLE FOR MY CHILD'S TUITION AND FEES AS DESCRIBED HEREIN.

**PLEASE GIVE 30 DAYS WRITTEN NOTICE BEFORE TERMINATING YOUR CHILD'S ENROLLMENT IN WISHING WELL PRESCHOOL.**

\_\_\_\_\_ (PLEASE INITIAL)

**DISCOUNTS**

IF THE FULL YEAR'S TUITION IS PAID IN FULL BEFORE THE SCHOOL TERM STARTS, YOU WILL RECEIVE A **5% DISCOUNT** FROM THE ANNUAL TUITION COST.

FOR FAMILIES WITH MULTIPLE CHILDREN ENROLLED AT WISHING WELL PRESCHOOL, WE OFFER DISCOUNTS FOR THE YOUNGER SIBLING'S TUITION.

<b>MULTIPLE CHILDREN DISCOUNTS</b>	
SECOND CHILD	5%
THIRD CHILD	5%

**ADMISSION POLICIES**

I UNDERSTAND THAT IN SIGNING THIS AGREEMENT I AGREE FOR MYSELF AND FOR MY CHILD TO ABIDE BY ALL OF THE REGULATIONS AND DECISIONS OF WISHING WELL PRESCHOOL, INCLUDING BUT NOT LIMITED TO ITS BY-LAWS, STATEMENTS OF POLICY AND THE RESOLUTIONS OF ITS CORPORATE OFFICERS. I UNDERSTAND THAT WISHING WELL PRESCHOOL RESERVES THE RIGHT TO AMEND THE CONDITIONS OF THIS AGREEMENT IF, IN THE SCHOOL'S DISCRETION, MY CHILD'S ACADEMIC, EMOTIONAL AND/OR BEHAVIORAL SITUATION SUGGESTS SUCH ACTION TO BE IN THE BEST INTEREST OF THE SCHOOL AND/OR MY CHILD.

\_\_\_\_\_ (PLEASE INITIAL)

**MEDIA RELEASE**

I PERMIT WISHING WELL PRESCHOOL TO USE AND PUBLISH PHOTOGRAPHS, FILM, AND/OR VIDEO OF ME AND/OR MY CHILDREN FOR PURPOSES OF PRESENTING RECREATION ACTIVITIES TO THE COMMUNITY AND TO PROMOTE WISHING WELL PRESCHOOL TO PROSPECTIVE CLIENTS AND/OR PARTICIPANTS. I ALSO GIVE PERMISSION TO RELEASE SUCH PHOTOGRAPHS AND/OR VIDEOTAPES TO THE NEWS MEDIA IN SUPPORT OF THE PROGRAM.

\_\_\_\_\_ (PLEASE INITIAL)

**TERMINATION**

THIS AGREEMENT CAN BE TERMINATED ONLY BY AN OFFICER OF WISHING WELL PRESCHOOL. COMMON REASONS FOR A CHILD'S ENROLLMENT TO BE TERMINATED FROM OUR PROGRAM INCLUDES BUT NOT LIMITED TO THE FOLLOWING: FAILURE TO PAY EACH MONTHS TUITION, CHILD'S BEHAVIOR IS A CONSISTENT DISTRACTION TO OTHERS, MOVES OUT OF STATE, OUT OF CONTROL BEHAVIOR, AND A SAFETY ISSUE TO OTHER CHILDREN. WRITTEN DOCUMENTATION WILL BE PROVIDED STATING THE REASON OR REASONS FOR TERMINATION TO THE CHILD'S PARENT'S OR LEGAL GUARDIAN.

\_\_\_\_\_ (PLEASE INITIAL)

**CONTINGENCIES**

I/WE DO RESERVE THE RIGHT TO CLOSE FOR ANY REASON IN WHICH I/WE CANNOT OPERATE IN A SAFE MANNER. I.E. LOSS OF ELECTRICITY, WATER, HEAT OR EXTREME CIRCUMSTANCES LOSS OF AIR CONDITIONING, AND MEDICAL EPIDEMICS. CHILD CARE FEES ARE PAID FOR ANY OF THESE OCCURRENCES..

\_\_\_\_\_ (PLEASE INITIAL)

**WAIVER AND RELEASE OF LIABILITY**

IN CONSIDERATION FOR BEING PERMITTED TO PARTICIPATE IN ALL PRESCHOOL ACTIVITIES AT WISHING WELL PRESCHOOL, I HEREBY WAIVE, RELEASE AND DISCHARGE ANY AND ALL CLAIMS FOR DAMAGE FOR PERSONAL INJURY, DEATH, OR PROPERTY DAMAGE WHICH MY CHILD OR I MAY HAVE OR WHICH MAY HEREAFTER ACCRUE TO MY CHILD OR ME, AS A RESULT OF PARTICIPATION IN SAID ACTIVITIES. THIS RELEASE IS INTENDED TO DISCHARGE IN ADVANCE WISHING WELL PRESCHOOL (ITS OFFICERS, EMPLOYEES, AND AGENTS) FROM ANY AND ALL LIABILITY ARISING OUT OF OR CONNECTED IN ANY WAY WITH MY CHILD'S OR MY PARTICIPATION IN SAID ACTIVITIES. IT IS UNDERSTOOD THAT THESE ACTIVITIES INVOLVE AN ELEMENT OF RISK AND DANGER OF ACCIDENTS, AND KNOWING THOSE RISKS, I HEREBY ASSUME THOSE RISKS FOR ME AND MY CHILD. IT IS FURTHER AGREED THAT THIS WAIVER, RELEASE, AND ASSUMPTION OF RISK IS TO BE BINDING ON MY HEIRS AND ASSIGNS. I AGREE TO INDEMNIFY AND TO HOLD THE ABOVE PERSONS OR ENTITIES FREE AND HARMLESS FROM ANY LOSS, LIABILITY, DAMAGE, COST, OR EXPENSE WHICH THEY MAY INCUR AS THE RESULT OF MY CHILD'S OR MY DEATH OR ANY INJURY OR PROPERTY DAMAGE THAT MY CHILD OR I

MAY SUSTAIN WHILE PARTICIPATING IN SAID ACTIVITIES. I ADDITIONALLY CONSENT THAT MY SON/ DAUGHTER, \_\_\_\_\_, PARTICIPATE IN PRESCHOOL ACTIVITIES AND I HEREBY EXECUTE THE ABOVE AGREEMENT, WAIVER AND RELEASE ON HIS/HER BEHALF. I HEREBY AGREE TO INDEMNIFY AND HOLD THE PERSONS AND ENTITIES MENTIONED ABOVE FREE AND HARMLESS FROM ANY LOSS, LIABILITY, DAMAGE, COST, OR EXPENSE, WHICH THEY MAY INCUR AS A RESULT OF THE DEATH OR ANY INJURY OR PROPERTY DAMAGE, THAT SAID MINOR MAY SUSTAIN WHILE PARTICIPATING IN SAID ACTIVITIES.

**I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND I FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS AGREEMENT CONTAINS A RELEASE OF LIABILITY AND THAT IT IS A CONTRACT BETWEEN WISHING WELL PRESCHOOL AND MYSELF AND THAT I AM SIGNING IT OF MY FREE WILL.**

PARENT/GUARDIAN NAME SIGNATURE	DATE
PARENT/GUARDIAN NAME SIGNATURE	DATE

ACCEPTED

\_\_\_\_\_  
**WISHING WELL PRESCHOOL**