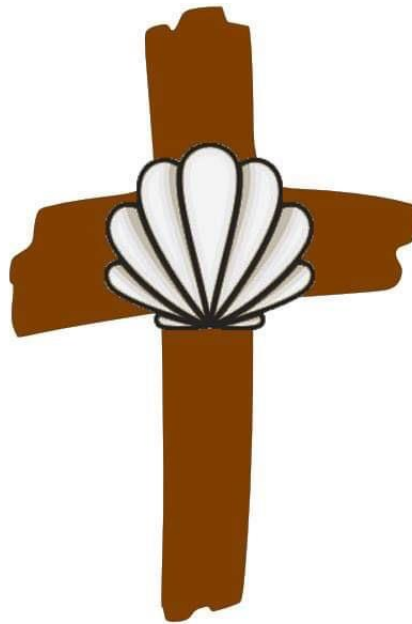


Sandbridge Chapel Day School

School Year 2019-2020



3041 Sandpiper Road, Virginia Beach, VA 23456
757-721-2401
www.sandbridgedayschool.com
scdsmail@gmail.com

Registration Instructions

1. Complete all sections of the registration packet.
2. Be prepared to make check payable to Sandbridge Chapel Day School (SCDS) or to make credit/debit card payment or ACH withdrawal for the appropriate registration fee.
3. If we do not have space available in the program you request, we will put you on our waiting list and call you as soon as space becomes available. No registration fee is required for the wait list.
4. Bring your child's shot records, physical form and original birth certificate or other proof of identity (birth registration card, passport, hospital notification of birth) to the school office on or before the first day of school. We will not be able to complete your packet until we see your child's original birth certificate.
5. The monthly tuition for each age group is based on an annual fee that covers all weeks of the school year from Sept. 3rd- June 12th. This monthly tuition does not cover Spring Break Week or Christmas Break Week.
6. SCDS follows VBPS yearly calendar and inclement weather closures. (With exception of VBPS early dismissal ½ day are SCDS full day.)
7. Students must bring their own lunch, snack and water bottle labeled with their first and last name.
8. Infants must have pre-made bottles, diapers and wipes.
9. If potty training, please bring pull-ups/diapers and wipes labeled with the child's first and last name.
10. Please pack at least one change of clothes each day attending, two to three for those potty training.
11. Children (kindergarten and younger) will be napping/resting between the hours of 1:00 and 2:45. Please bring a nap mat Mondays. Fridays it will be sent home to be washed.

2019-2020 Registration

(Physical, Shot Records and Birth Certificate Must be turned in prior to the 1st day of school.)

For Office Use Only:	Date of application:	Date of Entry:
	Teacher/Program:	
	Registration Paid:	Last Day attended:

PLEASE SELECT FROM THE PROGRAMS BELOW:

<input type="checkbox"/> Infants (up to Age 2)
<input type="checkbox"/> Toddlers (2 year-3 year olds*)
<input type="checkbox"/> Pre-School (3 potty trained-4 year olds*)
<input type="checkbox"/> After School (Kindergarten through Grade 5)

*By September 1, 2019

<input type="checkbox"/> Half Day Program (9am-1pm)
<input type="checkbox"/> Full Day Program (7am-6pm)

<input type="checkbox"/> 2 days a week (Tuesday/Thursday)
<input type="checkbox"/> 3 days a week (Monday/Wednesday/ Friday)
<input type="checkbox"/> 5 days a week (Monday- Friday)

Programs and Prices

Registration Fee: \$100

	Half Day	Full Day
Infants	9AM-1PM	7AM-6PM
6 weeks- 23 months		
2 days a week	\$206	\$449
3 days a week	\$307	\$673
5 days a week	\$511	\$1,111

	Half Day	Full Day
Toddlers	9AM-1PM	7AM-6PM
24 months to 3 and Potty Trained		
2 days a week	\$192	\$379
3 days a week	\$281	\$568
5 days a week	\$465	\$898

	Half Day	Full Day
Pre-K	9AM-1PM	7AM-6PM
3 and Potty Trained to 4		
2 days a week	\$179	\$354
3 days a week	\$265	\$521
5 days a week	\$451	\$828

School Age	3PM-6PM
2 days a week	\$147
3 days a week	\$225
5 days a week	\$368

Student Information

Student's Name:	Name child prefers to be called:	Age:	Sex:
Date of Birth:			
Home Address:			
If your child will be attending any other program please list the name of the other school program/s and grade:		Church Family Attends:	

Parents/Guardians Information

Mother:	Employer:	Business Phone:	Email Address:
Home Address: (If different)	Home Phone:	Cell Phone:	
Father:	Employer:	Business Phone:	Email Address:
Home Address: (If different)	Home Phone:	Cell Phone:	

Person(s) or Agency Having Legal Custody of Child if other than parent listed above:	Business Phone:	Email Address:
Home Address:	Home Phone:	
Business Address:	Cell Phone:	

PAYMENT OPTIONS

Tuition is due upon enrollment, to hold your child's spot. Cash, check ,and credit card payments are accepted. There is a \$35.00 return check charge. If more than 2 checks are returned payment will be required in cash.

All fees and tuitions are not refundable. Students may not begin until all fees have been paid in full.

All late payments will be assessed a fee and could result in the child being unable to attend the program.

WITHDRAWAL POLICY

I understand that the operating expenses of Sandbridge Chapel Day School are fixed, and a loss is realized if a vacancy occurs during the year. **No deductions can be made for vacations, holidays, or any other absences regardless of cause.** This statement will be in effect for as long as my child attends Sandbridge Chapel Day School. Sandbridge Chapel Day School reserves the right to disenroll any student at any time for any reason.

CLOSURE DATES

SCDS follows Virginia Beach Schools for closures and holidays. In the event of inclement weather Sandbridge Chapel Day School will make every attempt to contact parents (via email, text, Facebook). **No adjustments to tuition will be made as a result of any of the aforementioned closures.**

AGREEMENTS

_____ I hereby give my permission for the above-named child to participate in field trips with the school. I hereby release Sandbridge Chapel Day School its employees and agents from any liability for injuries sustained by my child while preparing for, going to, or returning from said field trips.

_____ I hereby give my consent for Sandbridge Chapel Day School to use photographs and or interviews with me or my child.

_____ In the event my child or anyone in my household comes down with a communicable disease I agree to notify staff within 24 hours so that they can notify other parents and health department if necessary (all names will remain confidential).

_____ An emergency preparedness plan is in place to help staff be prepared in the event of an emergency. This is posted in all classrooms and is available for review.

_____ I agree to provide up to date vaccination records and proof of ID (birth certificate passport, hospital record of birth) prior to the first day of attendance.

_____ I have received a copy of the parent handbook and agree to abide by its policies and procedures.

_____ Tuition is due prior to attendance and I am aware of all fees and deadlines for the registered program.

I have read and agree to the above terms.

Mother/Guardian _____ Signature _____ Date _____

Father/Guardian _____ Signature _____ Date _____