

# Purchase Children's Center 2020 - 2021

## 2 Year Old Program Enrollment Application

Welcome to the Purchase Children's Center. Applications are accepted based on priority and order received. Please complete this application and return it to the school office as follows:

### Tuesday December 10, 2019.

- 9:00am Siblings of students enrolled in the 2019-2020 school year and siblings of previously enrolled students.
- 9:30am Purchase Residents
- 10:00am All new registrants

After December 10, 2019, please submit all applications as soon as possible. Complete the information below. If you have any questions, please call or email the school office at 914-948-2414 or [Preschool@PurchaseHouse.com](mailto:Preschool@PurchaseHouse.com).

Student's Name: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age (as of July 1, 2020): \_\_\_\_\_  
(Last) (First) Month Day Year

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Gender:  Boy  Girl Is Your Child Toilet Trained? Yes  No  Special Requests: \_\_\_\_\_

Allergies, Medical Conditions, or Special Needs if any: \_\_\_\_\_

### Two Year Old Program 9:00 to 11:30

Choose the number of days per week and which days of the week you want to enroll.

Number of Days Per Week	Which Days of the Week
5 Days \$10,765	Monday
4 Days \$8,865	Tuesday
3 Days \$7,835	Wednesday
2 Days \$6,860	Thursday
	Friday

Mother or Guardian Name: \_\_\_\_\_ Home Phone (If different from student): \_\_\_\_\_  
(Last) (First)

Address (If different from student): \_\_\_\_\_ Business Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Father or Guardian Name: \_\_\_\_\_ Home Phone (If different from student): \_\_\_\_\_  
(Last) (First)

Address (If different from student): \_\_\_\_\_ Business Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Please read and sign our Enrollment Policies on the reverse side.

# Purchase Children's Center Enrollment Policies 2020 - 2021

## **REGISTRATION**

Students must be 2 years of age by December 31, 2020. Classroom selection **MUST** be submitted on the application. Every effort will be made to honor your classroom selection. Enrollment space is based on the number of students permitted per classroom. Applications will be processed in the order received and enrollment cannot be guaranteed.

## **PAYMENT**

A deposit check of \$1,500 per child is to accompany each application. The initial \$1500 deposit is **NOT REFUNDABLE**. Beginning in July, 2020, invoices will be issued on the first of the month with a payment of \$1,500 per child due by the 20<sup>th</sup> of that month. Monthly billing will continue until the balance is paid. If additional charges are incurred after the balance is paid, they are due by the 20<sup>th</sup> of the month in which they assessed.

## **REDUCTIONS AND CANCELLATIONS**

There are no refunds for a reduction in enrollment unless the student is replaced from a waiting list. Under no circumstances is the deposit refundable. No refunds or adjustments on paid or unpaid balances will be permitted. Enrollments are non-transferable. No fee or program adjustments will be granted for student absences.

## **GENERAL**

Medical reimbursement accident insurance is included in the classroom fee. The School will release children to either parent or persons authorized by same on site at any time during the day if parental arrangements for pick up have been made beforehand with the office. All visitors may be required to sign in at the office. Medical forms complete with records of up to date immunizations must be completed with doctor's and parent's signature by August 15, 2020. Due to New York State regulations, failure to comply will affect enrollment status.

I understand that the school will make my email, phone number and mailing address available to the school population for carpool and play date purposes unless directed otherwise in writing. The school is given irrevocable permission and authorization to use the child's photograph, portrait or image in connection with the school's brochure, web site, video or any other means of promotion or advertising.

Purchase Children's Center, Inc. reserves the right to refuse the enrollment of any child or to cancel this enrollment agreement at any time based on its sole and exclusive determination that the child's physical, mental, or emotional condition, would prevent that child from participating safely and satisfactorily in the programs offered; would prevent the child from interacting positively with other students or staff; or would negatively impact on Purchase Children's Center's ability to offer its fundamental services. The school can initiate the cancellation of this agreement and the dismissal of the child if, during the school year, the child or his/her agents exhibits unacceptable behavior which prevents our staff from safely supervising him/her or proves detrimental to himself/herself, other students or staff as determined by the Executive Director.

I enroll my child for the 2020 - 2021 school year and agree to the Release accompanying this application and the policies as stated herein. I further agree to abide by all school rules as outlined in the Parent Handbook which is posted on the school's website: [www.PurchaseChildrensCenter.com](http://www.PurchaseChildrensCenter.com).

Signature of Parent or Guardian

Print Name of Parent or Guardian

Student Name

Date

**Office Use Only**



# PURCHASE CHILDREN'S CENTER, INC.

3095 Purchase Street  
Purchase, New York 10577  
(914) 948-2414  
www.purchasechildrenscenter.com

James E. Kelly  
Executive Director

Barbara Paci  
Program Director

## **INSURANCE RELEASE 2020 - 2021**

In consideration of participating in the activities at Purchase Community, Inc. (DBA Purchase Community House or Purchase Day Camp or Purchase Children’s Center and herein referred to as “PCH”) and to use the equipment and facilities, the undersigned adult participant or parent or guardian in the case of a minor, agrees and acknowledges the following:

1. I hereby acknowledge and accept that the activities and use of some of the equipment at the PCH may involve inherent risks and could result in injury. I know the nature of the activities that my child is participating in and believe that my child is qualified to participate in the activities. I expressly state that my child is in good health and has no limitations that would preclude my child’s safe use of the equipment and facilities of the PCH. I acknowledge that if I deem the facilities and the equipment of the PCH to be unsafe I will not have my child participate in the related activity.
2. I hereby release, indemnify and discharge the PCH, its employees, volunteers, directors, affiliates, agents and successors and assigns, from any and all liabilities, suits, claims, and damages (including attorneys’ fees) incurred by me or my child arising out of the use or intended use of the PCH, its equipment or its facilities, including, without limitation, all claims for property damage, personal injuries or wrongful death, other than as a result of gross negligence, or intentional misconduct of the PCH.
3. I understand that the PCH and its personnel have the right to deny access to its facilities to any individual permanently or for a specified period of time, for any breach of any of the rules and regulations of the PCH and for any conduct that is viewed as unsafe or inappropriate.
4. I expressly state that I have read this document and I understand all of its provisions and that I fully acknowledge the nature and extent of the activities conducted at the PCH and the use of the facilities.
5. I hereby voluntarily assume those risks and understand that I will be solely responsible for injury, loss, damage or death to my child while my child is using the facility and participating in the activities therein.
6. I hereby give permission and authorization to Purchase Community, Inc. to use my child’s photograph, portrait or image in connection with the Purchase Community Inc, brochures, websites, video or any other means of promotion or advertising.
7. I hereby affirm that I am the parent or legal guardian of the child listed below.

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Child’s Name (Print)

Child’s Date of Birth

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Parent Name (Print)

Parent Signature

Date