



Child's Name: _____ **Enrolled in:** _____

The essential forms in this packet are enabled for electronic completion using Adobe Reader/Adobe Acrobat. You can also drop off in-person or mail to us. If submitting electronically, please send to curiousbynature@gigharborfoundation.org and remember to save a copy to your computer. If mailing, please send to: GGHF Curious by Nature School, 7191 Wagner Way, Suite 101, Gig Harbor, WA 98335

2022-2023 Enrollment Checklist

- Please read these materials carefully. Make sure you understand the School's Mission Statement, Philosophy and Tuition information received at the informational meeting and on the school's website at www.gigharborfoundation.org/cbns. If you have any questions regarding the registration agreement, please contact the School's Director at (253) 514-6338 ext. 103.
- Complete and sign the forms and return or mail them to GGHF Curious by Nature School.
- A **non-refundable registration fee of \$150** (\$100 for each additional child) is due upon notification of placement (approximately one week after receiving application). Make checks payable to GGHF Curious by Nature School. *We accept cash or Visa/MasterCard/Discover/American Express cards; transactions include a 2.59 to 3.5% fee.*
- A **non-refundable enrollment deposit** of 10% of total annual tuition (applied to the last month tuition) and annual supply fee are due **on or before June 1, 2022**.
- Request your child's **Immunization Record** from your health care provider and return form by **August 31, 2022**. Please review the Washington State Department of Health website for updated requirements and documents on allowable exemptions <https://www.doh.wa.gov/CommunityandEnvironment/Schools/Immunization/ExemptionLawChange>

GGHF Curious by Nature School does not discriminate on the basis of race, color, gender or gender identity, religion, sexual orientation, disability, cultural heritage, political beliefs, marital status, or national and ethnic origin in employment or the administration of its admissions programs or policies. When accepting enrollments, no geographical boundaries are observed. We are committed to being an inclusive community and seeking a diverse student population including children from a variety of racial, ethnic, religious, and socio-economic backgrounds.

2022-23 Program Schedule and Fees

We require a commitment from September 2022 to June 2023. Classes offered are dependent on enrollment numbers and COVID-19 restrictions and are subject to change.

Please rank your order of preference. I/We am/are registering my child for the following session(s):

PRESCHOOL CLASSES FOR 2-4 YEAR OLDS

- Chickadee Class (Indoor/Outdoor)**
Mon-Tue: 9:00 AM – 11:30 AM
Child must be 2 y.o. by Aug. 31.
Annual Tuition: \$3,160/Supply fee: \$125
- Hummingbird Class (Indoor/Outdoor)**
Wed-Thu: 9:00 AM – 12:00 PM
Recommended for ages 2.5 to 3.5.
Child must be at least 2.5 y.o. by Aug. 31 and toilet trained.
Annual Tuition: \$3,160/Supply fee: \$125
- Sparrow Class (All-Outdoor)**
Wed-Thu: 9:30 AM – 12:30 PM
Recommended for ages 2.5 to 3.5.
Child must be at least 2.5 y.o. by Aug. 31 and toilet trained.
Annual Tuition: \$3,160/Supply fee: \$125
- Orca Class (Indoor/Outdoor)**
Mon-Wed: 9:15 AM – 12:15 PM
Child must be 3 y.o. by Aug. 31 and independent in the bathroom.
Annual Tuition: \$4,640/Supply fee: \$125
- Banana Slug Class (All-Outdoor)**
Mon-Tue: 9:30 AM – 12:30 PM
Recommended for ages 3.5 to 4.5.
Child must be at least 3.5 y.o. by Aug. 31 and independent in the bathroom.
Annual Tuition: \$3,160/Supply fee: \$125
- Moon Snail Class (Indoor/Outdoor)**
Mon-Wed: 1:00 PM – 4:00 PM
Recommended for ages 3.5 to 4.5.
Child must be at least 3.5 y.o. by Aug. 31 and independent in the bathroom.
Annual Tuition: \$4,640/Supply fee: \$125

PRE-K CLASSES FOR 4-5 YEAR OLDS

- Fox Den Class (All-Outdoor)**
Mon-Wed: 9:15 AM – 12:15 PM
Child must be 4 y.o. by Aug. 31 and independent in the bathroom.
Annual Tuition: \$4,640
Supply fee: \$125
- Raven Class (Indoor/Outdoor)**
Mon-Wed: 1:00 PM – 4:00 PM
Child must be 4 y.o. by Aug. 31 and independent in the bathroom.
Annual Tuition: \$4,640
Supply fee: \$125
- Otter Class (Indoor/Outdoor)**
Mon-Thu: 9:15 AM – 12:15 PM
Child must be 4 y.o. by Aug. 31 and independent in the bathroom.
Annual Tuition: \$5,960/Supply fee: \$140

ENRICHMENT CLASSES FOR 5-9 YEAR OLDS

- Enrichment Class for 5-8 yr olds**
TUE: 1:00 PM – 4:00 PM (All-Outdoor)
Recommended for homeschool students and school age students K and up.
Annual Tuition: \$1,580/Supply fee: \$100
- Enrichment Class for 6-9 yr olds**
WED: 1:00 PM – 4:00 PM (All-Outdoor)
Recommended for homeschool students and school age students K and up.
Annual Tuition: \$1,580/Supply fee: \$100

Family Contact Information

Student Information

Child's Name: _____ Preferred Name: _____

Date of Birth: _____ Gender: _____ Toilet trained (Y/N): _____

Phone number: _____ Family Email: _____

Mailing Address, City, State, Zip: _____

Current GGHF CBNS student? Yes No Previous Student? Yes No

Former preschool (if any): _____

How did you hear about GGHF Curious by Nature School? _____

Parent/Guardian Information:

Parent 1/Guardian 1: Personal Information	Parent 2/Guardian 2: Personal Information
Full Name:	Full Name:
Relationship to student:	Relationship to student:
Street Address:	Street Address:
City/Zip:	City/Zip:
Home/Cell phone:	Home/Cell phone:
Work phone:	Work phone:
E-mail:	E-mail:
Occupation:	Occupation:
Employer:	Employer:

Check, as appropriate:

Child lives with: Both parents Mother Father Guardian: _____

Special custody arrangements: _____

Sibling Information

Please provide the following information on all applicant student's siblings:

_____	_____	Residing in Home with Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name	Age	
_____	_____	Residing in Home with Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name	Age	
_____	_____	Residing in Home with Applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name	Age	

Emergency Contact Information (if parents/guardians cannot be reached)

Emergency Contact:	Physician:
Name:	Name:
Address:	Address:
Home/Cell phone:	City/State/Zip:
Work phone:	Phone:
Relationship to child:	Practice name/type:

Additional Authorized Persons (other than those listed above)

Person authorized to pick up my child:	Person authorized to pick up my child:
Name:	Name:
Home/Cell phone:	Home/Cell phone:
Work phone:	Work phone:
Relationship to child:	Relationship to child:

Health History and Medical Consent

Child's Full Name: _____

Parent/Guardian #1 Name: _____

Parent/Guardian #2 Name: _____

Street Address (where child resides): _____

City, State and Zip: _____

Home phone: _____ Cell phone/Other: _____

I _____ (parent or legal guardian) hereby grant permission to the School's staff to 1) give emergency first aid and/or CPR by a qualified staff member and/or 2) seek medical attention for my child _____ (use full legal name), in the event such a treatment is deemed necessary, and I am unable to be contacted. I understand that every effort will be made to contact me, and unless immediate treatment is necessary, I will be contacted before any treatment is administered to my child.

I further consent to medical, and/or hospital care treatment to be performed for my child by my child's regular physician, or when a parent or my regular physician cannot be reached, by a licensed physician and/or hospital when deemed immediately necessary and advisable by a physician to safeguard my child's health. I waive the right of consent to such treatment.

I also give permission for my child to be transported by ambulance or aid car to an emergency medical care center for treatment in an emergency.

Name of Child's Physician _____ Phone: _____

Name of Child's Dentist _____ Phone: _____

Hospital of Choice _____ Date of last exam: _____

Are all immunizations up to date? _____ Phone: _____

List any known allergies _____

Any medications taken regularly? _____

Any chronic health issues or health concerns? _____

Insurance _____ Group # _____ ID # _____

Parent/Caregiver Signature: _____ Date: _____

2022-23 Enrollment and Tuition Agreement

1. *Registration fee & deposit:* I/We understand that a completed registration form and a one-time non-refundable registration fee of \$150 (and \$100 for each additional child) at the time of registration, plus a non-refundable enrollment deposit of 10% of total annual tuition (applied to the last month tuition) and annual supply fee, **due on or before June 1, 2022**, to hold my/our child's place in the class. Early withdrawal will result in forfeiture of the enrollment deposit, as deposit is used to bridge the financial gap while CBNS works to enroll another student in the program.
2. *Tuition:* I/We understand that I am responsible for payment of contracted fees, and will pay the annual tuition (*check one of the boxes below*):
 - In full by **August 1, 2022** (5% savings on annual tuition fees).
 - In half by **August 1, 2022, and remainder on January 1, 2023** (5% savings on annual tuition fees).
 - In 9 monthly installments, due the 1st of each month prior to month of attendance, with the first payment due on **August 1, 2022**, and last payment due on **April 1, 2023**.
3. *Multiple child discount:* I/We understand that if I am enrolling multiple children (who have the same parent), I will receive a \$20/month tuition discount for each child thus enrolled.
4. *Referral's discount:* GGHF Curious by Nature will discount my total monthly tuition by \$10/month for each student I refer to the school and who enrolls (and remains enrolled). Discounts will be applied in the month following the date the referred student starts attending. Referrals must be documented via the Referral Form for discount to apply. The referrals discount is limited to one discount per referred student. Once one family/person has received credit for a referred student, no additional referrals for that student will be accepted.
5. *Late payments:* I/We understand that a \$30 late fee will be charged for each late payment (after the 10-day grace period).
6. *Non-Sufficient Funds:* I/We understand that a \$30.00 charge is assessed for each Non-Sufficient Funds (NSF) check.
7. *Late pickup fee:* I/We am/are aware of the hours of operation and agree to drop off and pick up my child promptly. I/We will be charged \$25 for every half-hour or portion thereof, that I/we am/are late, starting 10 minutes past the end of my/our child's session.
8. *Refunds:* I/We understand that due to the school year planning required for GGHF Curious by Nature School, all fees (registration, deposit, supply, and tuition already paid for month attended) are non-refundable. Even if I/we leave before the end of the month, fees and service charges paid for that month will not be refunded. I/We understand that if I/we paid tuition in advance (full or half-yearly option) and leave before the end of the school year, I/we must provide 30-days written notice prior to receive a refund (less registration, deposit, supply, and service charge fees). I/we also understand that I/we do not receive adjustments in tuition fees for holidays or days missed.

9. *Volunteering and Fundraising:* I/We understand that as a nonprofit organization and, to keep tuition fees below our area's average, the school offers various volunteer opportunities and holds several fundraisers each year, and that my participation is expected.
10. *Permission for Participation:* I/We give my/our child permission to fully participate in this program.
11. *Location:* I/We understand that my child will be spending time on the grounds at GGHF Curious by Nature School and adjacent properties within a half-mile of the school.
12. *Responsibility:* I/We understand that the GGHF Curious by Nature School staff will assume full responsibility for my/our child from the time she/he is signed in by a parent to the time of departure. Only a parent or authorized person will be allowed to pick up my/our child.
13. *Release of Student:* I/We understand that if I/we fail to arrange for pick-up of my/our child, and I/we cannot be reached, school staff, within 30 minutes after closing time, or in accordance with state childcare licensing regulations, may release children to the custody of child protective services or other local authorities.
14. *Attendance:* I/We agree to contact the school by 9 a.m. for any reason my/our child will not attend school on a regularly scheduled day.
15. *Illness/Emergency:* I/We understand that if an illness or medical emergency arises, the staff will try to contact me. If I/we cannot be reached and the emergency is such that medical attention is necessary, the staff has my permission to call 911 and my/our child may be taken to the hospital if determined by the EMT staff.
16. *Photography:* I/We grant permission for my/our child to be photographed for educational/publicity purposes, where no personal information will be included.
- ___ Class Private Facebook Page ___ School Public Facebook Page ___ Class E-Newsletter
 ___ Take-home Projects/Documentation Displays ___ NO PHOTOS
17. *Parent Handbook:* I/We understand that a copy of the Parent Handbook will be given to me at the beginning of the school year, and I/we will abide by the guidelines and policies described within.

I/We understand and agree to the terms in this agreement for enrollment in GGHF Curious by Nature School.

Parent/Guardian Signature: _____ Date: _____

Office use only:

Date Received: _____ Time: _____ Amount \$ _____

Payment method: Cash Check (list check #) _____ Visa MasterCard Discover Am Ex