



Takoma Montessori School

"The child is both a hope and a promise for mankind"
Takomamontessori@gmail.com

7212 Carroll Avenue,
Takoma Park, MD 20912
301.304.3104

2023 Summer Program Application

A \$50.00 non-refundable application fee, a \$100 non-refundable supply & activity fee, and a \$100.00 non-refundable deposit must be submitted along with this application.

Student's Name:

Last Name

First Name

Middle Name

Male Female

Date of Birth: _____

Week One: June 26 – 30

Fairies & Knights

- Half Day (8:00am – 11:45am)
- School Day (8:00am – 2:45pm)
- All Day (8:00am – 5:00pm)

Week Two: July 3 – 7

God Bless America

- Half Day (8:00am – 11:45am)
- School Day (8:00am – 2:45pm)
- All Day (8:00am – 5:00pm)

Week Three: July 10 – 14

Creepy Crawlies

- Half Day (8:00am – 11:45am)
- School Day (8:00am – 2:45pm)
- All Day (8:00am – 5:00pm)

Week Four: July 17 – 21

Little Chefs

- Half Day (8:00am – 11:45am)
- School Day (8:00am – 2:45pm)
- All Day (8:00am – 5:00pm)

Week Five: July 24 – 28

Fun on the Farm

- Half Day (8:00am – 11:45am)
- School Day (8:00am – 2:45pm)
- All Day (8:00am – 5:00pm)

Week Six: July 31 – Aug 4

Cars and Trucks and Things that Go

- Half Day (8:00am – 11:45am)
- School Day (8:00am – 2:45pm)
- All Day (8:00am – 5:00pm)

Week Seven: August 7 – 11

Think Green

- Half Day (8:00am – 11:45am)
- School Day (8:00am – 2:45pm)
- All Day (8:00am – 5:00pm)

Week Eight: August 14 – 18

Little Chefs

- Half Day (8:00am – 11:45am)
- School Day (8:00am – 2:45pm)
- All Day (8:00am – 5:00pm)

Student Information:

Home Address: _____
Street City State Zip

Are there any allergies, medical conditions or physical disabilities the student has? _____

PARENT/GUARDIAN Name: _____ Relationship to child: _____

Address: _____

Profession/Employer's Name: _____

Work Address: _____

E-Mail: _____ Work Phone: ____ - ____ - ____ Cell Phone: ____ - ____ - ____

Marital Status: ___ Married ___ Single ___ Divorced ___ Widowed ___ Separated

PARENT/GUARDIAN Name: _____ Relationship to child: _____

Address: _____

Profession/Employer's Name: _____

Work Address: _____

E-Mail: _____ Work Phone: ____ - ____ - ____ Cell Phone: ____ - ____ - ____

Marital Status: ___ Married ___ Single ___ Divorced ___ Widowed ___ Separated

Applicant is living with:

Both Parents Father only Mother only Other (please specify)

School correspondence should be sent to:

Both Parents Father only Mother only Other (please specify)

Please indicate who is responsible for school related decisions:

Both Parents Father only Mother only Other (please specify)

Please indicate who is responsible for school bills:

Both Parents Father only Mother only Other (please specify)

Please indicate who has custody of the applicant:

Both Parents Father only Mother only Other (please specify)

Sibling Information:

<i>Name</i>	<i>Age</i>	<i>Grade</i>	<i>School</i>
<i>Name</i>	<i>Age</i>	<i>Grade</i>	<i>School</i>

Parent/Guardian Questionnaire:

1. Please explain your child in a few words.

2. Please explain what activities your child enjoys.

3. Please explain what activities your child has difficulty doing.

4. How did you learn about the TMS Summer Program?

TMS Summer Program Policy & Fee Agreement

1. **Application Fee:** The **non-refundable** \$50.00 application fee must be submitted with this application.

2. **Deposit:** A \$100.00 **non-refundable** deposit must be submitted with this application.

3. **Supply & Activity Fee:** A \$100.00 supply and activity fee for all children must be submitted with the June 1, 2023 payment. The supply and activity fee covers in-house field trips as well as daily snacks and supplies.

4. **Payments:** If you are signing up for 1 to 4 weeks of the TMS Summer Program, full payment will be due on June 1, 2023. If you are signing up for 4 to 8 weeks of the TMS Summer Program your fees will be divided into two payments. The first payment will be due on June 1, 2023 and the second payment will be due on July 1, 2023.

5. **Late Fee:** There is a late fee of 5% (per month) of the amount due for a payment more than 3 days late. Payments 10 days or more in arrears will result in the dismissal of your child from the program.

6. **Return Check Fee:** There is a \$75.00 fee for payments returned due to insufficient funds. If a check is returned for insufficient funds, your future payments will need to be in the form of a bank check.

7. **Payment Options:** Payment may be made via Blackbaud tuition or cash or check to TMS. TMS does not accept debit or credit cards.

8. **Financial Obligations:** Contracts are to ensure the stability of the program and are strictly enforced. Takoma Montessori School will not refund fees or cancel unpaid obligations if the applicant withdraws anytime during the 8 weeks of the TMS Summer Program. You are still contractually responsible for the balance of the fees owed.

9. **Collection Fees:** In the event that the school undertakes collection procedures with respect to this contract, the parents/guardians will be responsible for and agree to pay the school all costs of collection, including but not limited to court costs and attorneys' fees.

10. **Program Dismissal Policy:** The TMS Summer Program reserves the right to dismiss, without refund, any applicant for inappropriate or unsafe conduct.

11. **Cancellation Policy:** The TMS Summer Program reserves the right to cancel any programs or services due to insufficient interest.

12. **Early Arrival:** The Summer Program starts at 8:00am. Due to legal issues, staff cannot allow any child to enter the building before the opening time of 8:00am.

13. **Late Pick Up:** Children picked up after 12:00pm (Half Day Program) or 3:00pm (Full Day Program) will be checked into After Care and will be charged the daily drop-in rate of \$50.00. Payment is due, to the school office, on the day of service. There is a late fee of 5% of the amount due for payments more than 3 days late.

14. **After Care Late Pick Up:** After Care hours only extend to the closing time of 5:00pm. There is a fee of \$1.00 per minute for any late pickups after 5:00pm. Payment is due, to the school office, upon receipt of the invoice. There is a late fee of 5% of the amount due for payments more than 3 days late. Payments 10 days or more in arrears will result in the dismissal of your child from the program. If your child is picked up late **more than 3 times** this will result in their dismissal from the After-Care program.

15. **Authorization for Releasing Children:** For security reasons your child will only be permitted to leave with the authorized people listed on the child release form, unless prior authorization is provided. Any individuals that staff are not acquainted with, will be required to show identification when coming to pick up your child.

16. **Health Records:** If your child has special needs or requirements please notify us in writing. All children admitted to the TMS Summer Program must have their complete health records on file.

17. **Medication:** TMS Staff can administer medication only if we have the medication authorization form filled out by the guardian and doctor. Children with allergies, asthma or medical conditions must have this form completed and on file in the school office before their first day of attendance.

18. **Sick Child:** If a child becomes ill with vomiting, fever, diarrhea, or shows any symptoms that we feel need attention, we expect the child to be picked up immediately. Children can only return to the program when they have been symptom free for 24hours.

19. **Non-discrimination:** TMS does not discriminate on the basis of race, color, religion, or national origin in the admission of students, or employment of faculty and administrative staff.

20. **Falsified Information:** We reserve the right to withdraw acceptance or dismiss the applicant from the TMS Summer Program in case incomplete or incorrect information is provided. The information collected is confidential and is intended only for TMS purposes.

21. **Hold Harmless Agreement:** Takoma Montessori LLC, will not be held responsible for accident or injury to the children while they are in the classroom, on a field trip, or while they are on the way to the classroom or trip, except as shall be covered by the school insurance.

I have read and understand the TMS Summer Program Policy & Fee Agreement and will abide to the terms and conditions of this agreement.

X: _____
Signature of Parent/Guardian

Date: _____

Print Name of Parent/Guardian