



Welcome to Brightonview Montessori!

We are happy that you are considering our program for your child's early preschool years. We understand now more than ever how important our role is in partnering with your family. Our goal is to provide a safe, stable in-person teaching environment for your child.

As Brightonview you can expect:

- Light and bright classrooms
- Experienced, dedicated teachers
- Enhanced cleaning and sanitizing procedures
- Digital sign in/out and integrated communication tool
- Weekly teacher newsletters and open communication with the teachers and administrators.
- You will receive a compilation of notes, photos and videos of your little one during the day so that you can have peace of mind!
- Brightonview closed in March 2020 for two weeks and reopened thereafter with strict COVID-19 protocols. We continue to serve our families safely and in person.

To apply for admission to the 2021/22 school year, complete both the [Admission Application](#) and [Enrollment Contract](#). Once both are received, families will be notified within one week with the final determination. Applying does not guarantee placement; acceptance is made on a variety of factors including: admission application, schedule and age of the student. If accepted, in accordance with the enrollment contract, the deposit and enrollment fee will be processed and your child's enrollment and start date will be secured.

We look forward to partnering with your family!

-Brightonview Montessori-



Enrollment Contract
September 2, 2021 - June 10, 2022

| | | | |
|--|-----------|---|--|
| START DATE REQUESTED <input type="checkbox"/> September 2, 2021 - June 10, 2022 <input type="checkbox"/> Other Start Date of (include reason): | | SCHEDULE REQUESTED <input type="checkbox"/> 9-12 <input type="checkbox"/> 9-3 <input type="checkbox"/> 9-6 <input type="checkbox"/> 7:30 drop off Lunch: <input type="checkbox"/> Pizza Friday | |
| Student Name | | DOB | |
| Home Address | | | |
| Mother/Legal Guardian Name: | Cell | | |
| | Email | | |
| Father/Legal Guardian Name: | Cell | | |
| | Email | | |
| Child Lives With: | | | |
| HEALTH HISTORY (Every section requires completion, including address) | | | |
| Known Health Conditions (If none write "None") | | | |
| Doctor contact information REQUIRED | Name | | |
| | Address | | |
| | Phone | | |
| Date of last exam | Date | | |
| Dentist contact information (If none write "None") | Name | | |
| | Address | | |
| | Phone | | |
| AUTHORIZED PICKUP (If parents only, write "Parents Only") | | | |
| Authorized Pickup (Required) <input type="checkbox"/> Check the box if you would like this person to be able to send/receive messages & view all communication on Brightwheel | Full Name | | |
| | Address | | |
| | Phone # | | |
| Authorized Pickup <input type="checkbox"/> Check the box if you would like this person to be able to send/receive messages & view all communication on Brightwheel | Full Name | | |
| | Address | | |
| | Phone # | | |
| EMERGENCY CONTACT | | | |
| Full Name: | | Phone #: | |
| Address: | | | |



| ENROLLMENT AND DEPOSIT CHARGES <small>Fees will be charged once student is accepted and placement is guaranteed</small> | |
|---|-----------|
| Non-refundable Registration Fee (\$225) including Admission Application (\$75) | \$300 |
| 1 Non-refundable tuition deposit equal to one installment (applied to June 2022) | \$ |
| <input type="checkbox"/> Microsoft or Amazon Employee (5%)* ___YES ___NO or... <input type="checkbox"/> Sibling Discount (10%)* ___YES ___NO <small>The discount is not stockable and is applied to tuition only (including the deposit) *Proof of employment must be submitted with this Enrollment Contract.</small> | (\$) |
| Total non-refundable deposit collected with this registration | \$ |

| PRORATED TUITION FEES (If joining after September 2, 2021) | Office Use Only |
|---|-----------------|
| Prorated Current Month Installment: Daily Rate ____x____days attending in month | \$ |
| Total prorated tuition fees collected with this registration | \$ |

Tuition Rate Schedule
Please check your program(s)

| Program* | Schedule | Per Month** | Per Year |
|--------------------------|---------------|-------------|----------|
| Pre-Primary Half Day | 9am to 12pm | \$1,100 | \$11,000 |
| Pre-Primary Full Day | 9am to 3pm | \$1,525 | \$15,250 |
| Pre-Primary Extended Day | 9am to 6pm | \$1,785 | \$17,850 |
| Primary Half Day | 9am to 12pm | \$1,000 | \$10,000 |
| Primary Full Day | 9am to 3pm | \$1,425 | \$14,250 |
| Primary Extended Day | 9am to 6pm | \$1,650 | \$16,500 |
| Early Bird (all ages) | 7:30am to 9am | \$200 | \$2,000 |

*Regardless of classroom placement, the rate for the Pre-Primary program applies to children ages 18 months to 3 years. The rate for the Primary program applies for children over 3 years to 6 years old. Age is determined as of September 1st of the given school year.

Tuition is an **annual program fee, due in its entirety regardless of absence due to illness, vacation or any other circumstance, that may be paid in a **lump sum or divided into ten (monthly) installments**. Your account will be charged automatically on the 1st of each month starting September 1st and ending after June 1st.

I understand that some months have more school days than others, in addition some months have breaks such as spring break, winter break and a short month in June. I understand that tuition is based on an annual tuition fee and simply divided into ten monthly installments for convenience to the family. If you choose to attend summer camps after the school year ends, there will be an additional fee charged as this is not part of our academic school year.

Signature of person(s) responsible for tuition payments - I have read and agree to all of the above conditions.

Signature _____ Date _____

Signature _____ Date _____



Enrollment Contract Terms for School Year (September 2, 2021 - June 10, 2022)

Registration Fee

- The \$225 registration fee and \$75 admission application fee are charged once paperwork is received, and are non-refundable or not applicable to other fees.
- Your child's classroom placement will be sent out a week prior to the first day of school.

Deposits

- The non-refundable tuition deposit is equal to one month's tuition and is applied to the June 1st, 2022 installment. It is **not** applicable to summer camp, other months of the school year or any other charges. The deposit will be charged when space is guaranteed and the student is accepted.

Tuition

- Tuition is an annual program tuition fee that may be paid in a lump sum or divided into ten (monthly) installments. Tuition is due in its entirety regardless of absence due to illness, vacation or any other circumstance.
- Annual program tuition fees are applied between September 2, 2021 and June 10, 2022.
- Annual tuition is computed according to the number of actual school days on our school calendar and does not include holidays, vacations, in-service, and conference days.
- On non-school days, care may be offered for an additional cost and we reserve the right to cancel based on low enrollment or staffing. Care is not offered on federal holidays and the week of Christmas. Please refer to the annual calendar for exact dates.

Payment Terms/Schedule

- If you choose to make ten equal payments, refer to the payment schedule. The ten equal monthly payments are due regardless of the number of days in each month. **Reminder:** tuition is an annual fee, it is only divided into ten equal payments for convenience.
- Tuition is due on the first of each month and will be charged automatically via checking account or credit card. Using a credit card will add a 3% fee.
- There are no refunds or credits for absences, vacations, emergency closures or snow days.
- Checks returned by a bank will be subject to a \$25 charge.

Discounts

- A 10% discount is applied to the oldest child's tuition in families with more than one child.
- A Microsoft or Amazon discount of 5% applies to tuition (with photo ID showing your full name only if provided upon submission of this enrollment packet and not to be applied or adjusted later).
- Only one Amazon/Microsoft discount per family.
- Annual tuition paid in full by August 1st will be discounted by 3%; if paid by check or cash.

School Calendar

- I understand that Brightonview Montessori (BVM) will closely follow the LWSD calendar, but scheduled conference days and other necessary teacher in-service days may be different.
- Please refer to the annual calendar for closure dates including all holidays, teacher in-service, and conference days. Please note the days Brightonview is closed and WILL NOT offer care.



Care and Late Fees

- BVM offers a 15 minute drop-off and pickup window. Any time used outside of this window will be billed at \$13/hour to the closest 15 minutes. AM drop-off: 9:00-9:15; Half-day pickup: 11:45-12:00; Full day pickup: 2:45-3.
- On many non-school days, we offer camps. You must pre-register for the entire week/period offered; we reserve the right to cancel or offer only 9-3 care. 9:00-3:00 = \$75, 9:00-6:00 = \$95
- A surcharge of \$2 per minute will be assessed for late pick-up after 6:00 PM in addition to the hourly rate.
- Any time used beyond scheduled hours is billed at the rate of \$13.00 per hour.
- Additional care fees are automatically billed to your account at the end of each month; receipts are provided upon request.

General Information

- If BVM is unable to reach me (parents/guardians) or emergency contacts, I authorize the director, office administrator, or my child's teacher to care for my child until I can be reached; including transporting my child as needed.
- I authorize Brightonview Montessori to act on my behalf if medical attention is needed.
- Field Trips: I authorize my child to participate in school field trips with prior notice.
- Speed Limit & Traffic Rules: I agree to drive slowly and obey traffic rules around school.
- We reserve the right to disenroll a child if we determine it is necessary. Please refer to the parent handbook regarding our policies.
- If Brightonview cannot offer services for a period of one month or longer for any reason, they have the right to apply the deposit collected as the final installment/final month of services. No further financial considerations will be made.
- Families agree to follow the Parent Code of Conduct.
- Brightonview Montessori reserves the right to refuse service to a family for any legitimate reason including but not limited to a violation of the Code of Conduct or family handbook.

Photo Release Authorization

As the parent of a child or children at Brightonview Montessori, I agree to the following:

- I understand that my child(ren) whose name(s) are listed below may be photographed at BVM during normal daycare hours, field trips or activities.
- I understand that these photographs may be used in or posted on the BVM website, Facebook page, school newsletters or any other publication.
- I give permission for my child(ren)'s photographs to be posted on BVM website, Facebook page, newsletters or any other publication. When included, only first names would be used.
- I understand that I have the right to request, in writing, that a photo be removed from the BVM website or Facebook page within 30 workdays.
- I confirm that I have read and understood the above, and agree to have my child(ren)'s photos posted on Brightonview Montessori's website, Facebook page, newsletters or any other publication.

Withdrawal from School

Enrollment is a commitment for the entire school year and if a family chooses to withdraw their child during this time (September 2 – June 10) for any reason, including unforeseen circumstances such as job relocation, pandemic, flu, et al.) it is understood that:



1. The contract with Brightonview is broken and upon withdrawal the student's current or future placement is not guaranteed; and
2. The enrollment fee and tuition deposit are non-refundable; and
3. To withdraw for any reason, the family agrees to provide at least a 30 day written notice to Info@brightonview.net and understands item one and two above will apply. Failure to provide 30 days written notice will result in charges of tuition and fees in accordance with the contract until the 30 day notice has been satisfied. I understand that this includes situations resulting from a pandemic. If a family would like to return to the school, they must go through the entire enrollment process as a new student and enrollment, application fees, and deposits will apply.

Signature of person (s) responsible for tuition payments -- I have read and agree to all of the above conditions:

Signature: _____ Date: _____

Signature: _____ Date: _____



Payment Method Authorization
Direct Payments with ACH or Credit Card

I (we) authorize Brightonview Montessori to electronically debit my (our) account in agreement with enrollment contract:

Required: I (we) authorize Brightonview Montessori to keep my signature on file and to charge my credit card/direct debit my account for any unpaid amounts I owe that are 30 days past due. I understand that this authorization will remain in effect until 60 days following the completion of the school year (including summer school if enrolled). I agree to contact Brightonview Montessori if there are any changes to my credit card account information including the expiration date. If more than one person is responsible for a student's tuition, both parties must have current and valid payment information on file to ensure enrollment.

I agree to have the deposit and enrollment fee deducted today (date below) and understand that both are non-refundable.

If there are no changes to your current billing method, please check the box below to continue using the account on file.

| | |
|--|--|
| | No changes to my payment method, please continue using the same account. |
|--|--|

Please fill out if you would like to add, change or update your payment method:

| | | | |
|--|--|----------------------------|--|
| Checking Account (<i>Free - no additional fees</i>) | | Please attach a VOID check | |
| Name as it appears at bank: | | | |
| Bank Name: | | | |
| Checking Account # | | Routing # | |

| | |
|---|---|
| Credit Card - <i>please note there is 3% fee charged per transaction</i> | |
| Credit Card type (circle one): | Visa Mastercard American Express Discover Other _____ |
| Name on card: | |
| Credit Card #: | |
| Expiration Date: | |
| 3 digit code (AMEX has 4 digit code): | |

Signature _____ Date _____

Signature _____ Date _____



Deposit Payment Agreement

Please select your deposit method

Today I agree to pay the required deposit including the registration fee plus one month tuition installment applied to the June 1st, 2022 installment.

| | |
|--|--|
| | By personal check (provided) |
| | Electronically debit to checking account on file |

I (we) authorize Brightonview Montessori to electronically debit my (our) account for the required holding deposits in accordance with our contract. Deposit amounts are listed on page three of the contract and additional terms and conditions may be found in the entirety of this contract.

I (we) authorize Brightonview Montessori to keep my signature on file and to charge my credit card/direct debit my account for any unpaid amounts I owe that are 30 days past due. I understand that this authorization will remain in effect until 60 days following the completion of the school year (including summer school if enrolled). I agree to contact Brightonview Montessori if there are any changes to my credit card account information including a change of the expiration date. If more than one person is responsible for a student's tuition, both parties must have current and valid credit card information on file to ensure enrollment.

Enrollment paperwork is not accepted until the deposit is made, which includes the one month non-refundable tuition installment and enrollment fee. Placing your deposit does not guarantee a spot but it is required to be on the waitlist. If a spot is not available you will be notified within one month and you may either remain on the waitlist or your deposit will be refunded and you will be removed from our waitlist.

By paying the deposits above, I understand that all fees collected are non-refundable. I understand the deposit is applied to the June 1st, 2022 installment.

REGISTERING BEFORE MARCH 1, 2021 FOR SCHOOL YEAR:

If you are registering for the following school year and it is before March 1, 2021, the \$225 registration fee plus the \$75 admission fee is due with this application and the 1 month final installment will be automatically charged on March 1, 2021. In the event you would like to cancel enrollment, written notice must be provided by February 26, 2021 to Info@Brightonview.net. The \$225 + \$75 admission fees are non-refundable, regardless of the reason for your cancellation.

Signature: _____

Date: _____

Signature: _____

Date: _____



Enrollment Addendum

COVID-19 Contract Addendum

The following are changes to the enrollment contract for September 2, 2021 - June 10, 2022.

1. Brightonview Montessori will operate independently of the LWSD closure schedule if the school is closed or not on a normal in-person schedule..
2. In-person attendance: Cloth face coverings will be required and provided by the families until further notice and will be evaluated prior to the school year. Social distancing must be observed outside of the school as well as sanitization guidelines recommended by the State of WA and King County Department of Health. Your child may not attend if he/she is ill or someone in the family is ill. Temperatures and daily health screenings by families prior to arrival are required.
3. Families must read, agree and adhere to the COVID-19 Public Health Emergency Special Program Attendance - Acknowledgement and Disclosure Form included on the next page.
4. Families must adhere to the schedule in which they are registered, including adhering to the drop off and pickup times. Flexibility beyond the schedule is not permitted until classes are able to co-mingle. (Example: If your child needs to stay past 3:00PM any day, they must be registered for the 9-6 schedule).
5. Brightonview is an in-person learning facility and our goal is to serve families in-person for the school year; however, it is possible that emergency operation and procedures may be necessary. An emergency operation or closure is any deviation from the regular school calendar and learning method that BVM determines necessary to keep the students, staff and families safe. Factors impacting this decision will be:
 - Safety
 - Staffing
 - Best option that results in a return to in-person learning as quickly as possible.
 - Critical guidance; Governor Orders, Department of Children & Youth Services, Department of Health, CDC
6. Emergency operations may result in:
 - Remote learning in some capacity. (Packets, Zoom Circles, Videos)
 - If the decision is made to close, at least the first week will be reserved for classroom sanitizing and virtual learning planning; no instruction would be provided at that time.
 - Full closure of a classroom or entire facility.
 - Requests for some families to select temporary remote learning in order to accommodate those children whose families require in-person learning - as deemed necessary.
7. Tuition ensures classroom and teacher stability as well as the school ability to operate on a sound fiscal basis. Enrollment agreement and tuition installments are for the entire school year regardless of:
 - a. Emergency closure(s)
 - b. Emergency operations (defined above)
 - c. Child's attendance
8. Families who chose to withdraw from the school year agree to follow the "Withdrawal from School" policies (on page 5):

I understand that the above terms and conditions are an update to the contract that has been signed with Brightonview and I Have read, understand and agree to the following terms and conditions above.

Parent Name: _____

Student Name: _____

Parent Signature: _____

Date: _____

**COVID-19 PUBLIC HEALTH EMERGENCY
 SPECIAL PROGRAM ATTENDANCE
 ACKNOWLEDGMENT AND DISCLOSURE for STUDENT FAMILIES**

Please check off each item!

| | |
|---|---|
| I agree to all current policies regarding COVID-19 and understand that policies will be updated as the Pandemic progresses. | |
| | 1. I understand that during this COVID-19 Public Health Emergency I will NOT be permitted to enter the facility beyond the designated drop-off and pick-up area until further notice. I understand that this procedure change is for the safety of all persons present in the facility and to limit to the extent possible everyone's risk of exposure. I understand that it is my responsibility to inform any Authorized Pick-Up or Emergency Contact persons of the information contained herein. |
| | 2. I understand that IF there is an emergency requiring me to enter the facility beyond the designated drop-off and pick-up area I MUST wash my hands before entering, remove my shoes and wear a mask. While in the facility I must practice social distancing and remain 6ft from all other people, except for my own child. |
| | 3. I understand that to enter upon the facility premises my child must be free from COVID-19 symptoms. If, during the day, any of the following symptoms appear my child will be separated from the rest of the people in the center. I will be contacted, and my child MUST be picked up from the facility within 30 minutes of being notified. While we understand that many of these symptoms can also be related to non-COVID-19 related issues we must proceed with an abundance of caution during this Public Health Emergency. These symptoms typically appear 2-7 days after being infected so please take them seriously. Your child will need to be symptom free without any medications for 72 hours before returning to the facility. |
| | 4. I understand that my child's temperature will be taken throughout the day while on facility premises. |
| | 5. I understand that my child must wear a mask at all times while in the facility and on facility premises until further notice. I understand that I am responsible for washing the mask daily. To be evaluated and adjusted throughout the year based on guidance. |
| | 6. I understand that my child will be required to wash their hands using CDC recommended hand washing procedures throughout the day using warm running water and rubbing with soap for at least 20 seconds. |
| | 7. I understand that I must bring my child a pair of shoes to the facility that will ONLY be worn inside this facility and will be left here each evening. Staff will have the child change shoes in the designated area, put on their "center only shoes" followed by washing the child's hands. At pick up, Staff will remove the child's "center only shoes" and the child will be brought to the entrance where I will put on my child's outside shoes prior to leaving the facility. |
| | 8. I understand that outside of care, in order to control my child's exposure in the community, I will comply with any and all state, county or local stay-at-home orders, will limit my child's contact outside of care to persons living in my household. I will follow any recommendations from the CDC that limits my child's risk for exposure including wearing a mask in all public areas and remaining 6ft from all other people. |



| | |
|--|---|
| | 9. I will practice all recommended social distancing, exposure limiting practices recommended by the CDC and DOH. |
| | 10. I will immediately notify Brightonview management if I become aware of any person with whom my child or I have had contact exhibits any of the symptoms listed in Number 1 above, is advised to self-isolate, quarantine, or has tested positive, or is presumed positive for COVID-19. Further, I will immediately notify Brightonview management if anyone from my place of employment is presumed positive or tests positive for COVID-19 whether or not I have had direct contact with that person. |
| | 11. I understand that while present in the facility each day my child will be in contact with children, families and other employees who are also at risk of community exposure. I understand that no list of restrictions, guidelines or practices will remove 100% of the risk of exposure to COVID-19 as the virus can be transmitted by persons who are asymptomatic and before some people show signs of infection. I understand that I play a crucial role in keeping everyone in the facility safe and reducing the risk of exposure by following the practices outlined herein. |

I certify that I have read, understand, and agree to comply with the provisions listed herein. I acknowledge that failure to act in accordance with the provisions listed herein, or with any other policy or procedure outlined by Brightonview Montessori will result in termination of contract. I acknowledge that my contract will be terminated if it is determined that my actions, or lack of action unnecessarily exposes another employee, child, or their family member to COVID-19.

PARENT 1

Full Name

Signature

Date

PARENT 2

Full Name

Signature

Date
