

Registration Fees

Please understand that your child is not officially enrolled in your program of choice until we receive your registration fee. This fee is **non-refundable**. Registration is half price for the second child and additional siblings enrolling for the same term. Registration fees are applied in the following way:

- **\$125 for New SOLA students**
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- **\$100 for Re-enrolling students.**
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**** SOLA follows the New Hanover County Schools traditional calendar.**

Tuition Payment Plans in 10 Monthly Installments, *(August 1st through May 1st)*

All tuition is calculated by dividing the annual (or term) tuition into monthly payments. Tuition is due by the 1st of the month. These installments are due each month regardless of how many days you attend school. Monthly installments are to be the same amount each month and are not less on the months including vacations etc. We require tuition to arrive by the 5th of the month. After the 5th of the month you must include a late fee of \$25 to your payment. We do not send bills! If you find it necessary to leave SOLA during the school year you are responsible to provide a *minimum of 30 days paid notice* to give us an opportunity to fill your child's spot.

Extra days

SOLA will offer camps on closed days from time to time, pre-registration will be required. Please check with the staff to find out when this will be offered during the year. Terms do apply.

Early drop offs and late pick up

We need to be notified when you plan to be early or late. SOLA is not a day care program! All SOLA participants must adhere to NC limitations of attending our program for a **maximum** of 4 hours per day (**this does not apply to camp days!**).

Withdrawing, last minute drop outs, missed days, etc: **(This also applies to people who pre-register).**

When signing up for any SOLA program it is important that you notify us with at least 30 days notice of your intent not to attend. We allow a small number of children in our classes; therefore, last minute cancellations really affect our ability to run our program optimally. We will not take it lightly if you register your child for a space, and drop without a 30 day notice. This will result in forfeiture of any fees paid. In any event of no shows, cancellation, etc... SOLA will hold you financially responsible for all tuition owed until we can find a suitable replacement student.

Dismissal

SOLA has a philosophy of self-discipline, respect and safety. SOLA expects respectful, safe and gentle behavior at all times. Given the nature of this expectation, children with a disclosed or undisclosed behavioral difficulty, children displaying unacceptable behavior, or not performing to these standards while attending SOLA, will be dismissed early, suspended or expelled. Children who are dismissed early, suspended or expelled for any reason are not entitled to a refund or credit or released from financial obligations. .

Make up/Credit policy

If your child misses class, regardless of circumstance, understand that you are not entitled to a refund or credit. SOLA does not offer "make up classes". If space & circumstance permit, we reserve the right to offer a make up on a per case basis. Any credits that we allow you during a school year or summer term will dissolve or become null at the end of that term. You will receive a copy of this calendar in your handbook. It is your responsibility to stay up-to-date with schedule changes due to weather. We do not always broadcast our closings on the local news. Please assume if the county is taking an action to close, dismiss early, or open late, that SOLA will do the same. School closings due to weather are not entitled to a refund, credit, or "make-up" days. (Make up days for extended closings will be handled on a per case basis).

910.798.1700



School of Learning Art www.solaschools.com

2017-2018 Registration & Contract

Complete this form and return with a check for your deposit to 216 Pine Grove Drive, Wilmington, NC 28403

*Please only include name of the child for which you are the legal guardian

Student Information

Program:

Days:

Table with 5 columns: Full Name, Nickname, Birth Date (M,D,Y), Grade or Age in August '17, Important information (such as food allergies)

Parent/Applicant information (PRINT):

- Full Name:
Home Phone:
Mobile Phone:
Work Phone:
Birthday(NO yr. needed):
E-mail:
Occupation:
*Please bubble in the best method to reach you during school hours!

2nd Parent/Caregiver information (PRINT):

- Full Name:
Home Phone:
Mobile Phone:
Work Phone:
Birthday(NO yr. needed):
E-mail:
Occupation:
*Please bubble in the best method to reach you during school hours!

Table for Home Address and Billing Address with fields for Street, City, State, and Zip

In Case of illness or injury please list your local emergency contact's names & best phone numbers to reach them:

1. 2.

*****People (other than parents) authorized to pick up your child at anytime:

If anyone is NOT authorized please detail that information here and specify "Do not allow __?__ to pick up without permission":

Health Information

Table for Health Information with fields: Insured's Name, Insurance Company, Child's Full Name, Procedures to follow, Policy # or SSN, Child's Primary Care Physician, Child's Dentist, Medication Allergies, Food Allergies, Other Allergies, Medications, Known or suspected behavioral conditions, Comments

Read & Sign:

I, the parent or legal guardian, hereby authorize SOLA to act for me according to their best judgment in any emergency requiring medical attention for the child or children named above. In addition, I give permission to SOLA staff to begin CPR if deemed needed. I understand it is my responsibility to provide accident and health coverage for the child or children named above while they are attending SOLA. I will not hold SOLA liable for common accidents that happen involving my child(ren), while in SOLA's care. I also authorize the child or children named above to participate in all SOLA indoor and outdoor activities. Undisclosed behavioral issues that my child or children have may cause their dismissal from the program. I realize I'm not eligible for a refund if my child is dismissed for any reason or if I am in default of this contract. I agree that photos and/or video of my child or children named above may be used by SOLA for marketing purposes. Your signature conveys agreement with all SOLA policies, our handbook, written notices, e-mails and verbal communication and that you will be an ethical, considerate parent who lavishes heaps of appreciation upon your child's caregivers who work for praise and leftover cookies.

Signature:

Date: