



CHILD'S GARDEN LEARNING CENTER

10210 DONLEIGH DRIVE, COLUMBIA, MD 21046

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www.childsgardenlc.com

FALL 2019 REGISTRATION PACKET ELEMENTARY SCHOOL STUDENTS

Dear Parents:

Attached is our registration packet for the 2019-2020 Before and After School Program.

You may register your child by returning the completed Registration Form with a non-refundable Registration Fee of \$60.00. Contracts will be available the first week of school.

NOTE: Any changes made concerning contract times and/or days must be made in writing by August 1, 2019. Otherwise, 30 days written notice is needed for any changes.

Thank you,

Harry Walker
Director

Tuition and Fees for 2019-2020

REGISTRATION FEE	\$ 60.00	non-refundable
BEFORE SCHOOL	\$ 275.00	monthly (9 payments)
AFTER SCHOOL	\$ 347.00	monthly (9 payments)
BEFORE & AFTER SCHOOL	\$ 622.00	monthly (9 payments)
LATE PICK-UP CHARGES:	\$ 25.00	per 15 min. increment after 6 pm

The above rates do not include days the public schools are closed. You will be billed separately for those days as extra hours. Extra hours will be billed each month and are due upon receipt. Please indicate "extra hours" on your payment. Monthly tuition is due the first day of each month (September-May).

SUMMER CAMP: \$ 319.00 weekly

If you pre-register for Summer Camp, the Summer Registration fee will be waived. Summer Camp deposit of two weeks tuition will be due in April.

2019-2020 CALENDAR DATES CLOSED *

Labor Day - Monday, September 2, 2019

Thanksgiving - Thursday and Friday, November 28 & 29, 2019

Christmas and New Year's - December 24, 2019 through January 1, 2020

Martin Luther King, Jr.'s Birthday - Monday, January 20, 2020

Presidents' Day - Monday, February 17, 2020

Easter Monday - Monday, April 13, 2020

Memorial Day - Monday, May 25, 2020

** All dates are subject to change. **

**CHILD'S GARDEN LEARNING CENTER
FALL 2019 REGISTRATION for ELEMENTARY STUDENTS**

Please complete all items.

CHILD'S NAME: _____

BIRTH DATE: _____ AGE: _____ GRADE entering Fall 2019: _____

HOME PHONE NO: _____

ADDRESS: _____

Does your child have an IEP/IFSP? _____

Would you like to provide all or part of the IEP to Child's Garden? _____

PARENT / GUARDIAN INFORMATION:

Parent

Parent

Name: _____

Social Security No.: _____

Phone No.: Work _____

Phone No.: Cell _____

Email Address: _____

I wish to enroll my child in:

_____ BEFORE SCHOOL CARE September 3, 2019 to June 15, 2020 *
\$275.00 per month (9 payments)

_____ AFTER SCHOOL CARE September 3, 2019 to June 15, 2020 *
\$347.00 per month (9 payments)

_____ SUMMER CAMP June 15, 2020 to September 4, 2020 *
\$319 per week if pre-registered
with Fall registration

* dates subject to change to conform with the Howard County Public School calendar.

Please complete the back of this form.

FOR OFFICE USE ONLY

date rec'd: _____ Reg. fee: _____ Tuition: _____ Payment: _____

**CHILD'S GARDEN LEARNING CENTER
FALL 2019**

PERMISSION TO WALK TO/FROM SCHOOL

I/We the parents/guardians of _____, give permission for him/her to walk to/from Atholton Elementary School. We understand that our child will be under the care and supervision of Child's Garden Staff while walking to/from school.

Parent/Guardian

Date