



ACADEMIC YEAR 2024/2025

Facility #191804850

Dear Parents:

As we look forward to the 2024-2025 school year, we are already beginning to work on our class placement process. When making these decisions, we work in close collaboration with our teachers.

Factors that we consider are:

- Balance of gender within each class
- Group dynamics
- Social and emotional development
- Staff teaching styles

We put an extraordinary amount of time, attention and reflection to class placements. We appreciate your insights however we cannot take/guarantee specific parent requests. Please know that we have your child's best interest at heart. Broadening your child's friendships and peer relationships is an opportunity for personal growth and building social skills.

We appreciate your ongoing support and trust.

Sincerely,

Ms. Mary
Director



ACADEMIC YEAR 2024/2025

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TUITION RATES

Fountain Day School is committed to superior and affordable education for all.

Our services are available year-round, and we therefore base our tuition on a 12-month schedule.

Our 12-month contract secures your child's place at our school. Families may choose to take vacation time; however, all families are still responsible to continue to pay full tuition through the term of the contract.

We do not prorate for vacations, holidays, or illness. If the school or a classroom needs to shut down for any unforeseen reason, we will resume operations virtually (via Zoom). We appreciate your understanding and support.

BASIC TUITION RATES

(BASED ON A 12 MONTH CONTRACT)

Preschool - Kindergarten

\$2,200 per month or \$26,400 annual (12 months) + yearly charges

One Time Only New Student Enrollment Fee: \$1850

Nonrefundable payable upon acceptance.

Tuition includes a hot lunch, two snacks a day, and all special enrichment programs (i.e. swimming.)

Hours of operations are 8:00 A.M. to 5:00 P.M.

YEARLY CHARGES

PTA	\$150 per family (Friends of Fountain Day School) August 2024
Emergency Preparedness Fee	\$325 per family August 2024



PAYMENT PLAN

Our payment plans make the tuition collection process more efficient.
Your co-operation and support are necessary and appreciated.

OPTION PLANS

OPTION 1

Full annual payment in advance...receives a 5% tuition discount by September 15, 2024

OPTION 2

Monthly cash or check payments by the 15th of the month for the upcoming month.
Automatic Check withdraw is available.

OPTION 3

Authorized credit card postings charged on the 15th of every month for the coming month.
Example you will be charged on July 15th for the month of August. There is a \$20 monthly convenience fee for using your charge card.

All checks received after the twentieth (20th) of the month will be considered late.

Returned Checks: \$25 fee. Returned checks must be paid for, in cash, within 15 days of notification.

30 Days Overdue: If your tuition is over 30 days late there is a \$50 monthly recurring late fee. Unpaid balances after 30 days will be charged and additional 3% interest charge on the balance monthly. Unpaid balances will be considered a breach of contract and subject to Administrative review and possible expulsion.

Refunds: Families choosing to leave Fountain Day School for whatever reason must give Fountain Day School 45-day notice.



I hereby authorize Fountain Day School to charge monthly tuition and other school fees to the following credit card or bank account on the 15th of the prior month.

MasterCard VISA American Express Checking

Account Number _____

Expiration Date ____ / ____ Security Code _____ Zip Code _____

Print Name _____

Bank Name _____

Account Number _____

Routing Number _____

Account Holders Name & Phone Number _____

Child's Name _____

Signature _____ Date _____

Amount to charge: \$2,200 per child

Service fee: \$20 per child

Total: \$2,220



PHOTO AND VIDEO RELEASE FORM

Throughout the year, Fountain Day School students are photographed, video recorded as they participate in routine academic, artistic or athletic activities. The photos and videos are used in school-related promotional and advertising materials disseminated to the public through newspapers, magazines, admissions materials, our website, social media, and other channels deemed appropriate and safe by Fountain Day School administration.

I give Fountain Day School permission to use, edit, reproduce, and publish photographs, video and audio of the Student, both while the Student attends Fountain Day School and thereafter in perpetuity. This authorization permit the use of photographs, video and audio in any medium or form of distribution, including, but not limited to the Fountain Day School website, newsletters, brochures, yearbook, media outlets, promotional materials, or in any other manner as determined by the sole discretion of Fountain Day School.

Student Name _____ Class _____

Parent Name _____

Parent Signature _____ Date _____



SWIM PROGRAM

Fountain Day School offers swim lessons to our students. Qualified swim instructors will be in the pool to guide and teach your children. Classes are offered twice a week per classroom, are part of our curriculum and they are included in your tuition. We DO NOT offer makeup classes if missed for any reason. In the summer there will be an increased amount of swim lessons available that will be part of your tuition at no extra cost.

We reserve the right to refuse swim lessons to children who are sick or misbehaving.

Parents should consult with Ms. Mary if they would like to watch their child's swim lesson.

Things your child will need to bring with them:

- **Please mark your child's name on all items**, we are not responsible for lost or stolen items.
- One swim suit, girls must bring one-piece suits, **NO BIKINIS**.
- A reusable swim diaper for all children who are not potty trained.
- A wet/dry bag to keep swim items in.

PLEASE SIGN AND RETURN THIS LETTER TO THE OFFICE

I give permission for my child, _____
to participate in swim lessons at Fountain Day School.

Parent Name _____

Parent Signature _____ Date _____



ALLERGY ALERT

Fountain Day School has a no nut policy

STUDENT INFORMATION

Student Name _____

My child does not have any allergies

My child is allergic to the following items:

My child has the following special condition to look out for:

Has your child ever experienced a seizure (including fever seizure)? Yes No

I am supplying the following items for my child (please check if applicable):

Asthma Inhaler

Epi Pen

Other _____

Parent Signature

Date