

ACADEMIC YEAR 2025/2026

Facility #191804850

Dear Parents:

As we look forward to the 2025-2026 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
- 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 Owner/Director



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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 \$200 per family (Friends of Fountain Day School) August 2025
Emergency \$325 per family August 2025
Freparedness Fee



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

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

OPTION 2

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

All checks/payments 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 an 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 by 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 |
| SignatureDate |
| |

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_ | |
|-------------------|--|
|-------------------|--|



ALLERGY ALERT

Fountain Day School has a no nut policy

STUDENT INFORMATION

Student Name

□ My child does not have any allergies

 \Box 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 seiz | ure (including fever | seizure)? | Yes □No |
|---------------------|--------------------|----------------------|-----------|---------|
| , | | (5 | , | |

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

□ Asthma Inhaler

🗆 Epi Pen

□ Other _____