

SMPO School Enrichment Program - Enrollment Form

For SEP Classes at Sands only – use MWEduArts form for their classes.

Enrollment Info: Class sizes are limited; spots are filled first come, first served as completed enrollment materials (including payment) are received. Please fill out separate forms for each enrolling child; and make separate checks for each class. All classes are subject to sufficient enrollment. You will be notified promptly and your payment returned if a class must be cancelled. Instructors have the right to charge administrative fees for returned checks.

Scholarships: The SMPO sponsors a limited amount of SEP Scholarship money through the Sharon McCreary Scholarship fund. To be considered for a scholarship, you must qualify for a free or reduced lunch. To apply, check the request box on the other side of this form and an application will be sent home. In order to secure a spot in the class, you must turn in your Enrollment Form and Scholarship co-pay amount (the amount in parentheses next to the cost in the class descriptions) as soon as possible. Please do not wait for the Scholarship Application. If you do not qualify for a Scholarship, we can always take you out of a class, but it will be hard to add in to some of the popular classes.

Limit one scholarship class per student per semester with an annual maximum award of \$120.

Student Safety and Supervision: Classes begin at 3:45 pm unless otherwise noted in the brochure. For these classes, students will be dismissed directly to their SEP classroom and Instructors are responsible for children until a parent signs them out and picks them up. You must go into the building to sign your child out. Please be respectful of the Instructor's time and pick your child up promptly at the end of class. Class dismissal times vary as do specific term dates; be sure to check the brochure for exact times.

Important: There will be a fee of \$25 after the first 15 minutes for late pickup.

SEP classes are considered a change in dismissal. You must inform your child's Sands classroom teacher of the specific SEP class dates prior to the first class. Please also **inform the instructor directly if your child will be absent from an SEP class** for any reason. Thank you for your cooperation in keeping our children safe and supervised!

By signing below...

- I give permission for my child to participate in the classes listed in the SEP Brochure.
- I understand that SEP classes are considered a change in dismissal and agree to notify my child's teacher of his/her enrollment in SEP and any schedule changes.
- I agree to sign my child out and pick them up promptly at the stated end time of the SEP class and I understand that **I may be charged a fee for late pick-up.**
- I will notify the SEP instructor if my child will be absent from class.
- I understand that the class may involve additional expenses beyond the instructional fee and that I am fully responsible for those fees, even if I receive a scholarship.
- I understand that my child is expected to follow the Sands Montessori code of conduct (5 Cs + 1) and to comply with the SEP Instructor's rules and regulations.
- I understand that after attending the first day of class and assessing the class as a parent and child, there will be no reimbursement of tuition. Attending a second session of the class requires full payment. Requests for special accommodations are to be directed to the instructor.

Parent/guardian signature

date

Questions: Contact the SEP Coordinator, Scott LeCates at 604-4127 or s.lecates@fuse.net

SMPO School Enrichment Program
Class Enrollment and Emergency Contact Information
(do not use this form for MWEdArts Center classes)

Enrollment forms and payment should be submitted to the office in an envelope marked "SEP-SMPO"

Make checks payable to the instructor or company listed below each class description. You may post-date your check to the date of the first day of class.

[] Please send a **scholarship application**. I've enclosed the scholarship co-pay amount as payment.

[] My child should be escorted to CRC aftercare after class

PLEASE PRINT CLEARLY.

Student name _____

Grade _____ Room# _____

Parent/Guardian _____

Address _____ Zip _____

Home phone # _____ Cell phone# _____

E-mail address _____

Emergency Contact Name and Phone # _____

SEP Class(es) & Day(s) _____

My child may be picked at the end of the SEP class by the following people (include yourself):

Is your child taking any medication? No Yes _____

Is there any physical or medical condition the teacher should know about? No Yes _____

Is your child allergic to any medication or substance? No Yes _____

Preferred physician _____ phone# _____

Preferred dentist _____ phone# _____

Preferred hospital _____ phone# _____