

Desert Meadows Preschool Registration 2025–26 Agreement Start and End Dates: August 04, 2025 to May 20, 2026 Located at Desert Meadows School

Student Information		
Child's Name:	Birth Date:/	Age on Aug 4:
Address:	City	Zip code
Parent/Guardian Information		
Parent #1 Name:	Contact Phone Number:	Email:
Parent #2 Name:	Contact Phone Number:	Email:
Plans and Fees Non-Refundable Fees: \$75.00 Re	gistration Fee + \$75.00 Supply Fee (D	ue Yearly)
Check the box for the plan(s) for	which you are registering:	
□ <u>Preschool Only:</u> Weekly Fee \$	160.00 (8:00-3:00) Student cannot be sig	ned in before 7:55 and must be picked up by 3:05
□ <u>Preschool + AM:</u> Weekly Fee	\$195.00 (6:30-3:00)	
□ <u>Preschool + PM Care:</u> Weekly	Fee \$230.00 (8:00-6:00)	
□ <u>Preschool + AM/PM Care:</u> We	ekly Fee \$250.00 (6:30-6:00)	
□ <u>Drop-In Early Release Day:</u> \$2	5.00 Per Day (Early Release Dismissed a	t 1:30 if not currently enrolled in PM Care)
□ <u>Drop-In Morning Care:</u> \$20.00	Per Day (Any time before 7:55 a.m.)	
□ <u>Drop-In After Care:</u> \$20.00 Pe	r Day (Any time after 3:05 p.m.)	
Read and Initial Each Stateme	nt Below:	
I have read, understand, and agree to a	dhere to the parent handbook and payment policies	S.
	ot paid prior to service my child cannot attend and I	
	or days that are not used. Accounts cannot be place	d in hold.
	UIRED TO STOP OR DECREASE SERVICES.	
	d for the "Preschool Only" plan and I arrive early (b billed an additional \$20 for that day or \$75.00 if it is	efore 7:55 a.m.) I will be billed an additional \$20.00 for that day for more than one day.
I understand I am responsible for my cl Qualified families may apply for fre	· -	nch or purchase one. School lunches are \$2.50 per meal.
I understand my child must be toilet-tra	ined to attend these programs.	
This agreement is subject to change to	meet the needs of the Laveen School District.	
		uding public programs provided by schools, and have the s such as, but not limited to; newsletters, brochures, and

Parent /Guardian's Signature	Date	
 I understand that I must subr 	the Laveen School District 2025-20 mit a copy of my 25-26 School Year op In Program/Option is excluded	Contract in order to receive a 10%
DES Authorized Services I understand if my DES services sto I understand if I fail to follow DES ru I will be responsible for that day's tui I understand I am responsible to pa		attendance sheet
Registration will not be accepted with Completed registration form with si New Student Enrollment Form Part Official Birth Certificate ADHS Emergency Information Form Immunization Record Parent/Guardian's ID Special Diet Form Court Paperwork (If applicable) IEP (Required if applicable) If you wish to change your original All changes must be done in person Desert Meadows School.	gnature 1 & 2 registration you must complete a	new registration form.
New registration form submitted or \$20 fee will be assessed on 3 rd regis		date:
Due at Time of Registration: \$ Registration Fee (Non-Refundable) \$ Supply Fee (Non-Refundable) \$ First-week Tuition Payment (Not Respondent to the paid online or by check, money Club office.	efundable if space if forfeited) order in the designated checkboxes. Cash	n payments can only be made at the Kids
Start Date: For Office Use Only	_	
·	Office Conv	1
ProCare Information: Parent/ Guardian	Office Copy	-
Billing	Site Copy	-
Ledger/Tracking	DES Authorization Received	-
Billed Registration/Supply / 1st Week	School Emailed on:	-
Information: Rosters	Processed By:	

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