

2024 - 2025 Pre-School Registration Form

•			Phone: <u>(</u>)					
Address:									
City:			Zip:						
Email:									
2 year old se	lect (Mon/Wed) or (Tue/Thu) (9am	n-10:30am)	3 year olds (Tue/Thu 9am-11:30am) 4/5 Full Day (Mon/Wed/Fri 9am-2pm)						
4/5 Half Day	(Mon/Wed/Fri 9am-11:30am)								
	its best to accommodate those lassistance, please initial and v								
Child's First Name	Child's Last Name	Date of E	Birth Gender	Tuition Total					
7.755.7760				\$					
				\$					
Paying n	nonthly		Paying	in full					
	, I agree to pay the Midlothian P		Total	Amount					
			mough April) of flext schedulet	d business day)					
Late Payment: \$ 50.00 Declined Payment: \$ 35.00	(If payments are not paid :	15 days after due date)	(last 4 digits of cc o						
Late Payment: \$ 50.00	(If payments are not paid :	15 days after due date)	(last 4 digits of cc o						
Late Payment: \$ 50.00 Declined Payment: \$ 35.00	(If payments are not paid :(If payments are declined	1.5 days after due date) by your financial institution)	(last 4 digits of cc o	on file)					
Late Payment: \$ 50.00 Declined Payment: \$ 35.00 Month	(If payments are not paid :(If payments are declined	1.5 days after due date) by your financial institution)	(last 4 digits of cc o	on file)					
Late Payment: \$ 50.00 Declined Payment: \$ 35.00 Month Enrollment Payment	(If payments are not paid :(If payments are declined	1.5 days after due date) by your financial institution)	(last 4 digits of cc o	on file)					
Late Payment: \$ 50.00 Declined Payment: \$ 35.00 Month Enrollment Payment September	(If payments are not paid :(If payments are declined	1.5 days after due date) by your financial institution)	(last 4 digits of cc o	on file)					
Declined Payment: \$ 50.00 Month Enrollment Payment September October	(If payments are not paid :(If payments are declined	1.5 days after due date) by your financial institution)	(last 4 digits of cc o	on file)					
Declined Payment: \$ 50.00 Month Enrollment Payment September October November	(If payments are not paid :(If payments are declined	1.5 days after due date) by your financial institution)	(last 4 digits of cc o	on file)					
Late Payment: \$ 50.00 Declined Payment: \$ 35.00 Month Enrollment Payment September October November December	(If payments are not paid :(If payments are declined	1.5 days after due date) by your financial institution)	(last 4 digits of cc o	on file)					
Declined Payment: \$ 50.00 Month Enrollment Payment September October November December January	(If payments are not paid :(If payments are declined	1.5 days after due date) by your financial institution)	(last 4 digits of cc o	on file)					

THIS WAIVER MUST BE SIGNED BY ALL ADULTS 18 YEARS OLD AND OLDER

The Midlothian Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. The Midlothian Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, the participants and parents/guardians of minors registering for this program/activity must recognize that there is an inherent risk of injury when choosing to participate in recreational activities. You are solely responsible for determining if you or your minor child/ward are physical fit and/or skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered an illness, injury, or impairment, to consult a physician before undertaking any physical activity. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity/program. Understandably, not all hazards and dangers are foreseen. Participants must understand that certain risks, dangers and injuries due to acts of God, inclement weather, slipping, falling, equipment failure, and failure in supervision, premises defects and all other circumstances inherent to recreational activities/programs exist. In this regard, it must be recognized that it is impossible for the Midlothian Park District to guarantee absolute safety.

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming he risk and legal liability and waiving and releasing all claims for injuries, damages, or loss which you or your minor child/ward might sustain as a result of participating in any and all of the activities connected with and associated with this program/activity (including transportation services, when provided). I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages, or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Midlothian Park District, including its officials, agents, volunteers, and employees. I do hereby fully release and forever discharge the Midlothian Park District from any and all claims for injuries, damages, or loss that my child/ward or I may have or which my accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with this program/activity. I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims.

I hereby understand the Midlothian Park District's Pre-School Tuition & Late Fee Policy and accept all payments (monthly and full tuition).

NOTE: PARTICIPATION WILL BE DENIED IF THE SIGNATURE OF ADULT PARENT/GUARDIAN AND DATE ARE NOT ON THIS WA									
Print Name	Relationship to child								
Signature	Date								

Office Use ONLY Please date and initial next to each form after it is obtained.							
Birth Certificate:	EFT Form:						
Emergency Form:	Medication Wavier:						
Inclusion Form:	Auto-Payment set up:						



Monthly Pre-School Payment Agreement

The Monthly Pre-School Payment Agreement is a continuous monthly payment plan from September through April and your enrollment payment. I understand that payments will continue for the 2024 – 2025 school year until cancellation is made in writing to the Midlothian Park District at least 15 days prior to your next drafted payment. I further acknowledge that this agreement is to supersede any previous agreements with the Midlothian Park District.

I		Please P					her	eby gra	ant aut	hority	to the	Midlo	thian	Park	District
throug plan, I days a allowe institu	rge my ogh April), agree to fter you ed to retition are	credit of the control	card for ext sche t the er duled c class u ct to a s	duled nrollme lue dat ntil ful \$35.00	busine ent par te, you I paym I fee pl	ess day yment or acco nent is	startii , which unt wi made.	ng with n is nor II be ch Paym	n my ei n-refur narged ents th	nrollmendable. \$50.00 nat are	ent pay . If you O and y	ment. r payn our ch	To i nent i ild wi	initiat is not ill not	e this paid 15 be
Credit Card:		Visa		Mastercard		American Express				Discover					
Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х				
Expi	Expiration Date:									•	C	VV Co	de:	•	
						Of	fice U	se ONL	Υ.						
Pre-School Class:						Child's Name:									
Tuition Full Amount:					Monthly Amount:										
all paym any payr must be this agre	ents from inent not be	my accou honored any chan superse	int unlessed by my a ges to the de any pr	ccount for e account evious a	ation is not any real or any real to cred greemen	nade in v ason, I re it card in	vriting at alize tha writing a	least 15 t I am stil at least 1	days prid I respons days pr	or to the sible for t ior to the	date you hat paym payment	r accoun ent. The date. I	t is to b Midlotl further	e draft hian Pai acknow	ledge that
			Sign	ature					_			Date			