



Red Robin Country Day School
878 Jericho Turnpike, Westbury, New York 11590
Phone 516.334.1144
Fax 516.334.0565

SCHOOL REGISTRATION FORM

Boy Girl

_____/_____/_____
Student's Last Name First Name MI

_____/_____/_____
Street Address Town Zip

_____/_____/_____/_____/_____/_____
Birthdate Age as of Sept. Home Phone Family Email Address

_____/_____/_____/_____/_____/_____
Father's Name & Business Phone Cell Phone

_____/_____/_____/_____/_____/_____
Mother's Name & Business Phone Cell Phone

_____/_____/_____/_____/_____/_____
Family Physician's Name Address Phone

1-_____/_____/_____/_____/_____/_____/_____/_____/_____/_____
Emergency Names & Phones (indicate two)

Personal Comments (indicate special needs, allergies, etc.)

Program:

Toddler Nursery Pre-Kindergarten Kindergarten

Session:

9:00AM – 12:00PM Morning 5 Days – Monday through Friday
 1:00PM – 4:00PM Afternoon 4 Days – (Choose any four)
 9:00AM – 2:00PM 3/4 Day 3 Days – Monday, Wednesday, Friday
 9:00AM – 4:00PM Full Day 2 Days – Tuesday, Thursday (If available)

Extended Hours:

AM ONLY (7AM-9AM) PM ONLY (4PM-6PM) AM & PM

Transportation:*

Morning Session (Round-Trip) One way only. Please indicate:
 Afternoon Session (Round-Trip) 8AM 12PM 2PM 4PM
 ¾ Day Session (Round-Trip) Parent Drop-Off and Pick-Up
 Full Day Session (Round-Trip)

* Transportation is not available before 8AM or after 4PM.

Conditions of Enrollment

- Tuition is based on a school year and payable over 10 monthly installments (September through June).
- A deposit of one installment of the annual tuition (June payment), along with the \$105 application fee, are required for registration.
- For your convenience, the annual tuition may be paid in 10 equal installments. Your remaining 9 payments are due on the first day of each month from September through May. Invoices will not be sent. Once again, your deposit will be applied to your 10th and final tuition installment (June payment).
- A 10% sibling discount will be applied for the child with the lower base tuition.
- A 5% discount will be applied when a child's tuition is paid in full prior to the start of the school year (excluding application fee). Tuition may not be paid with a credit or debit card when receiving the 5% discount.
- Withdrawal from any Red Robin School program must be brought to the attention of the directors at least one month prior to the start of the school year or the planned withdrawal, which occurs once the school year has begun. In the event of such a withdrawal, please understand that the deposit and application fee will be non-refundable. In addition, a prorated fee will apply when a withdrawal occurs after the start of a particular month.
- No tuition adjustments, refunds, or make-up days will be made or given for school closings, either scheduled or due to acts of nature, student absences, transportation delays, or extended family vacations.
- Red Robin reserves the right to cancel this contract in the event of a delinquent payment as determined by the directors, and I agree to pay all legal fees incurred during any collection process.
- I understand that a \$25 late fee will be assessed for any payments received after the 10th of each month. In addition, I agree to pay Red Robin a \$25 service charge for any and all checks returned from my bank for non-payments.
- I give permission for my child to participate in **all** of Red Robin School's programs, activities and special events, **without exception**. Furthermore, I understand that my child will participate in school activities involving running, jumping, climbing, ball playing and other recreational sports and physical activities. I understand and acknowledge that these activities carry some risk of physical injury to my child.
- Permission is given for participation in local school conducted field trips.
- If transportation is requested, permission is given to transport my child to and from school. I assume full responsibility for my child between my home and the transporting vehicle.
- Consent is given to Red Robin to use photos and/or videos of my child for promotion of Red Robin and its programs.
- Permission is given for my child, in case of an emergency when neither a parent nor family physician can be reached, to be treated in the emergency room of a local hospital or at a physician's office.

I fully acknowledge, agree to, and commit to fulfilling all of the above policies and obligations listed on the front and back of this registration form.

X _____ / / _____
 Parent's Signature Date

For office use only:

Regular Monthly Payment:

\$ _____

\$ _____ as of ____ / ____ / ____ \$ _____ as of ____ / ____ / ____ \$ _____ as of ____ / ____ / ____

Fee for extended AM hours: \$ _____ Fee for extended PM hours: \$ _____

	Date	Adjustments		Date	Adjustments
App Fee	\$ _____	_____	Feb	\$ _____	_____
Deposit	\$ _____	_____	Mar	\$ _____	_____
Sept	\$ _____	_____	Apr	\$ _____	_____
Oct	\$ _____	_____	May	\$ _____	_____
Nov	\$ _____	_____		\$ _____	_____
Dec	\$ _____	_____		\$ _____	_____
Jan	\$ _____	_____		\$ _____	_____