



APPLICATION FORM 2017-2018

CHILD

		Start Date	
Child's Name		Birth Date	
Address			
City		State	Zip Code
Phone			

PARENT

Name		Relationship to Child	
Address			
City		State	Zip Code
Email		Work Phone	
Home Phone		Mobile Phone	

PARENT 2

Name		Relationship to Child	
Address			
City		State	Zip Code
Email		Work Phone	
Home Phone		Mobile Phone	

Tulip Tree Preschool
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www.tuliptreepreschool.com





Tulip Tree Preschool Schedule of Fees 2017-2018

\$25 - Application Fee

Due with your application, non-refundable.

\$200 - Yearly Enrollment Fee

Charged upon contractual agreement, non-refundable, yearly.

2017-2018 Tuition Rates (effective beginning June 2017)

<u>12 mos- ready for preschool</u>	<u>Preschool</u>
THREE FULL DAYS	THREE FULL DAYS
8-5	8:30-2:30
\$1045.00/month	\$700.00/month
	8:30-5:30
	\$950.00/month
FOUR FULL DAYS	FOUR FULL DAYS
8-5	8:30-2:30
\$1210.00/month	\$800.00/month
	8:30-5:30
	\$1150.00/month
FIVE FULL DAYS	FIVE FULL DAYS
8-5	8:30-2:30
\$1400.00/month	\$900.00/month
	8:30-5:30
	\$1350.00/month

Fine Print: For your convenience, annual tuition is broken into 12 equal monthly installments. The first and last installments are due June 1st 2017, or upon enrollment if later. The second installment is due on October 1st, etc. until paid in full. A 5% reduction on the annual tuition is given if paid in full by May 15th 2017. We do not prorate for vacation days. **All tuition and fees are non-refundable.**

Enrollment Options 2017-2018

Child's name _____ Elm House _____

Child's DOB _____ Preschool _____

Please mark 1, 2, and 3 in order of preference.

___ 3 days- Monday, Tuesday, and Wednesday

___ 3 days- Wednesday, Thursday, and Friday

___ 4 days- Monday, Tuesday, Thursday, and Friday

___ 5 days- Monday through Friday

___ Please check here if you have a family makeup that allows for priority enrollment. Minorities: people of color, persons or families who are differently abled, refugee families, immigrant families, families with two moms or two dads, kids being raised by grandparents, families who qualify for DHS. (We probably forgot some, so feel free to embellish!)

___ Please check here if you are interested in joining mid-year, in the occasion that an enrollment spot opens up.

Severe Allergies:

If your child has severe allergies, this must be discussed prior to acceptance to ensure that we have the capacity to meet your child's needs.

I understand the policies stated above.

Signature _____ Date _____