

Applicant lives with: (check one)

Both Parents Mother Father Legal Guardian Other (Specify)

Siblings

Name	Age	Current School	Name	Age	Current School

In the event the Parent/Guardian cannot be reached, please call (these individuals are authorized to pick up the Applicant)

Name	Address	Phone number	Relationship
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Tuition policies and rates are established each January by Tabula Rasa for the upcoming academic year. Snack and Lunch are included with the tuition. Field trip and material fees (if any) are not included with the tuition. If the child has any food allergies, the parents should supply all food from home.

Application Fee: \$100 per year/per student

Tuition		
Days of attendance	Monthly	Weekly
2 full days/week	\$500	N/A
3 mornings/week	\$500	N/A
3 full days/week	\$650	N/A
5 mornings/week	\$650	N/A
5 full days/week	\$800	\$210
Afterschool Elementary, two afternoons	\$200	N/A
Afterschool Elementary, five afternoons	\$320	N/A
GA-Prekindergarten, afterschool (2pm-6pm)	\$200	\$50
GA-Prekindergarten, Snack/Lunch	\$120	\$30

Schools hours: 7.00am-6.00pm
Infant-Pre-K Morning program hours: 7.00am-1.00pm
 GA-Prekindergarten before/afterschool hours: 7.00am-8.00am, 2.00pm-6.00pm
 GA-Prekindergarten drop off and pick-up: 7.45am-8.00am, 2.00pm-2.15pm
 If tuition is paid upfront a discount of 5% is already calculated on the amount due.

ALL TUITION AND RELATED FEES ARE NONREFUNDABLE.

We, the parents of _____, understand the fee structure. We will pay tuition on time without requesting an invoice.

Date _____ **X** _____
 Parent Signature

Date _____ **X** _____
 Parent Signature

MEDICAL/EMERGENCY INFORMATION

Emergency Information

Name of Child _____ Name of Parent _____ Phone number _____

Birth date _____ Last Physical Examination _____

Emergency contact: Name and phone number(s) of two adult relatives we may call in case of emergency when parent is not available:

Name _____ Phone Number _____ Relationship _____

Name _____ Phone Number _____ Relationship _____

Child's Physician:

Name _____ Phone Number _____ Hospital _____

Health Concerns:

Does your child suffer from any chronic conditions or allergies, does s/he have any limitations or special needs? Does the child take any medication? If yes, please explain in full on the space provided below:

Does the school have permission to administer Tylenol or other medication to your child if the need arises? _____

Does the child take any medication on regular basis? _____ If yes, please specify:

Medical Release

I hereby authorize the staff of Tabula Rasa The Language Academy to contact the persons named on this card and do authorize the named physician or his or her associates to render such treatment as may be deemed necessary in an emergency, for the health of said child. In the event that the persons named on this card cannot be reached, Tabula Rasa Staff are hereby authorized to take whatever action is deemed necessary in its sole judgment for the health of the aforesaid child. Any expenses incurred for the above will be the sole responsibility of the Parent(s)/Guardian(s).

I HAVE READ, UNDERSTOOD AND AGREE TO THIS EMERGENCY RELEASE.

Date _____ X _____
Parent Signature

Date _____ X _____
Parent Signature

Date _____ X _____
Authorized Representative of Tabula Rasa

Supplemental information (for MMO and 2 year old Preschool children)

Name of Child _____ Name of Parent _____ Phone number _____

Eating Behavior

Drinks: Breast feed Bottle Cup with lid
 Eats: Uses spoon Uses hands
 How is feed: Lap High Chair Infant seat Other
 Food: Brand _____ Quantity _____ Frequency _____
 Other: Allergies? _____
 History of colic? _____

Sleeping Behavior

Where (at home): Crib Bed
 Rest times: _____
 What does he/she takes to bed (blanket, bottle, pacifier, etc) _____
 Mood upon awakening: _____
 Other (Specify): _____

Toilet Habits

Your child is: Toilet Trained Currently Toilet Trained
 If Toilet training, does he/she indicate bathroom needs? Yes No
 What wears: Disposable Diapers Pull-Ups Other
 Do you use: Desitin Powder Special Wipes Other
 Is diaper rash a problem? Yes No
 Is diarrhea or constipation a problem? Yes No

Miscellaneous

What (if anything) do you do for teething? _____
 How does child relates to strangers? _____