



ANNUAL ENROLLMENT CONTRACT 2016-2017

Student Name: _____ Date of Birth: _____

Address: _____

City, State, Zip: _____

Student's E-mail address: _____ Student's Cell Phone: _____

Name of Parent (or guardian): _____

Home address: _____

City, State, Zip: _____ Phone: _____

E-mail address: _____ Cell Phone: _____

Work Phone: _____

Name of Parent (or guardian): _____

Home address: _____

City, State, Zip: _____ Phone: _____

E-mail address: _____ Cell Phone: _____

Work Phone: _____

If requesting part-time Attendance, what days of the week will this student usually be attending?

(Continued on back)

Name and address of someone other than the parents or guardians to be contacted in case of emergency:

Name: _____ Address: _____

City, State, Zip: _____ Phone: _____

The following people are authorized to pick up this student from school:

Name of student's general physician: _____

Address: _____

Phone: _____

Please provide a copy of the student's immunization records, or a letter stating that the child has not been immunized due to medical, religious, or philosophical reasons.

We wish the above student to attend Sego Lily School for the year commencing _____.

If the student is admitted to the school, we agree to pay the monthly tuition of _____, due on the fifth of each month, by automatic withdrawal managed by FACTS tuition service. There is a \$46 fee per family that will be billed on our first monthly invoice. There is a 10% discount for 2016-2017 school year if annual tuition is paid in full in advance, and registration with FACTS is not required if this option is chosen (not available for students with scholarships). We understand that the plans and operations of the school depend upon this tuition and that ***any tuition already paid to Sego Lily School will not be refunded whether or not the student attends for any part or all of the full month or year.*** We have received a copy of the rules adopted by the School Meeting. We have read and understand these rules and agree that we will abide by them. We also understand that severe rule infractions may result in suspension and/or expulsion, and that no refunds of tuition are available regardless of the reason a student stops attending Sego Lily School. We acknowledge that participation in the Judicial Process is mandatory for all students. We also agree to abide by the By-Laws of Sego Lily School, and understand that these By-Laws are available in the office for us to read at any time.

We require families to read "Trusting Children" (a copy was given to you in your child's Visiting Week) before the Admissions interview.

Signed: _____ Date: _____
(student)

Signed: _____ Date: _____
(parent or guardian)

Signed: _____ Date: _____
(parent or guardian)

Sego Lily School admits students of any race, color, national and ethnic origin, and sexual orientation to all rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin, and sexual orientation in administration of its tuition discount policy and other school administered programs.