



2022-2023 REGISTRATION COMPLETION CHECKLIST

Please make sure all applicable forms are completed before submitting your application.

- Completed Application & Schedule Options
- Non-refundable Registration Fee and Deposit (Deposit is applied to the final payment)
Cash or check payable to "RNSK"
 - New families: \$175 Registration Fee + \$300 Deposit = \$475 / child
 - Returning families: \$150 Registration Fee + \$300 Deposit = \$450 / child
- Signed Credit Card Authorization (if applicable) – **IF FILLED OUT AND HANDED IN, TUITION WILL BE AUTOMATICALLY CHARGED TO YOUR CARD FOR EACH PAYMENT DUE.**
- Signed and initialed RNSK Tuition & Refund Policy
- Signed RNSK Policy Statement
- Signed RNSK Parent Agreement
- Completed & Signed Emergency Form
- Completed & Signed Special Needs Questionnaire
- Completed & Signed Dental Hygiene Form
- Completed & Signed Napping Agreement
- Completed Medical Forms (including well visit, updated immunizations, and TB test / waiver form)

**ENROLLMENT APPLICATION: 2022 / 2023
RIDGEWAY NURSERY SCHOOL & KINDERGARTEN
465 RIDGEWAY
WHITE PLAINS, NY 10605**

TODAY'S DATE: _____

CHILD'S LAST NAME: _____

CHILD'S FIRST NAME: _____

NICKNAME (if used): _____ **GENDER:** _____ **DOB:** _____

ETHNICITY (please circle; information used for school census)

AFRICAN AMERICAN AMERICAN INDIAN ASIAN CAUCASIAN HISPANIC MULTICULTURAL

STREET ADDRESS: _____

CITY & STATE: _____

ZIP CODE: _____

HOME PHONE: _____

MOTHER'S NAME: _____

OCCUPATION: _____

FATHER'S NAME: _____

OCCUPATION: _____

MOTHER'S CELL: _____

FATHER'S CELL: _____

MOTHER'S EMAIL: _____

FATHER'S EMAIL: _____

RELIGION: _____

HOME SCHOOL DISTRICT: _____

ALLERGIES: _____

**RIDGEWAY NURSERY SCHOOL & KINDERGARTEN
2022-2023 SCHOOL YEAR**

SCHEDULE OPTIONS

**2 YEAR OLD PROGRAM
(PLEASE CHECK YOUR HALF AND / OR FULL DAY OPTIONS)**

Please select
your
schedule

Please select
your payment
installment
preference
(circle one)

Installment Amounts
4 Payments 10 Payments

PROGRAM	DAYS	TIME	TUITION	SELECTION		QUARTERLY	MONTHLY
3 HALF DAYS	M / W / F	9AM - 11:20AM	5,191	<input type="checkbox"/>	Q / M	1,297.75	519.10
5 HALF DAYS	M - F	9AM - 11:20AM	7,077	<input type="checkbox"/>	Q / M	1,769.25	707.70
3 FULL DAYS	M / W / F	9AM - 2:50PM	8,691	<input type="checkbox"/>	Q / M	2,172.75	869.10
5 FULL DAYS	M - F	9AM - 2:50PM	13,131	<input type="checkbox"/>	Q / M	3,282.75	1,313.10

3 YEAR OLD PROGRAM (PLEASE CHECK ONE OPTION)

Please select
your
schedule

Please select
your payment
installment
preference
(circle one)

Installment Amounts
4 Payments 10 Payments

PROGRAM	DAYS	TIME	TUITION	SELECTION		QUARTERLY	MONTHLY
3 HALF DAYS	T / W / TH	9AM - 11:30AM	5,191	<input type="checkbox"/>	Q / M	1,297.75	519.10
5 HALF DAYS	M - F	9AM - 11:30AM	7,077	<input type="checkbox"/>	Q / M	1,769.25	707.70
3 FULL DAYS	T / W / TH	9AM - 3PM	8,691	<input type="checkbox"/>	Q / M	2,172.75	869.10
3 FULL DAYS and 2 HALF DAYS	Full: T / W / TH and Half: M / F	9AM - 3PM 9AM - 11:30AM	10,788	<input type="checkbox"/>	Q / M	2,697.00	1,078.80
5 FULL DAYS	M - F	9AM - 3PM	13,131	<input type="checkbox"/>	Q / M	3,282.75	1,313.10

4 YEAR OLD PROGRAM (PLEASE CHECK ONE OPTION)

Please select
your
schedule

Please select
your payment
installment
preference
(circle one)

Installment Amounts
4 Payments 10 Payments

PROGRAM	DAYS	TIME	TUITION	SELECTION		QUARTERLY	MONTHLY
5 HALF DAYS	M - F	9AM - 11:30AM	7,077	<input type="checkbox"/>	Q / M	1,769.25	707.70
3 FULL DAYS and 2 HALF DAYS	Full: T / W / TH and Half: M / F	9AM - 3PM 9AM - 11:30AM	10,788	<input type="checkbox"/>	Q / M	2,697.00	1,078.80
5 FULL DAYS	M - F	9AM - 3PM	13,131	<input type="checkbox"/>	Q / M	3,282.75	1,313.10

KINDERGARTEN PROGRAM (PLEASE CHECK ONE OPTION)

Please select
your
schedule

Please select
your payment
installment
preference
(circle one)

Installment Amounts
4 Payments 10 Payments

PROGRAM	DAYS	TIME	TUITION	SELECTION		QUARTERLY	MONTHLY
3 FULL DAYS and 2 HALF DAYS	Full: T / W / TH and Half: M / F	9AM - 3PM 9AM - 12PM	11,048	<input type="checkbox"/>	Q / M	2,762.00	1,104.80
5 FULL DAYS	M - F	9AM - 3PM	13,445	<input type="checkbox"/>	Q / M	3,361.25	1,344.50

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ADDITIONAL PROGRAMS

EARLY DROP OFF

Please Select
Schedule
For 5 Days

Please Circle
Your Selected
Days

PROGRAM	ANNUAL FEE PER DAY	ANNUAL FEE - 5 DAYS	5 DAY	DAY SELECTION
7:30AM	640	3,200	<input type="checkbox"/>	M T W Th F
8AM	426	2,130	<input type="checkbox"/>	M T W Th F
8:30AM	225	1,125	<input type="checkbox"/>	M T W Th F

**LUNCH BUNCH (3's & 4's only)
LUNCH PROVIDED**

Please Select
Schedule
For 5 Days

Please Circle
Your Selected
Days

PROGRAM	ANNUAL FEE PER DAY	ANNUAL FEE - 5 DAYS	5 DAY	SELECTION
11:30AM - 1PM	708	3,540	<input type="checkbox"/>	M T W Th F

CLUBHOUSE (2's only)

Please Select
Schedule
For 5 Days

Please Circle
Your Selected
Days

PROGRAM	ANNUAL FEE PER DAY	ANNUAL FEE - 5 DAYS	5 DAY	SELECTION
2:50PM - 5:30PM	773	3,865	<input type="checkbox"/>	M T W Th F

AFTERNOON ENRICHMENT (3's, 4's, & K only)

Please Select
Schedule
For 5 Days

Please Circle
Your Selected
Days

PROGRAM	ANNUAL FEE PER DAY	ANNUAL FEE - 5 DAYS	5 DAY	SELECTION
3PM - 4:30PM	464	2,320	<input type="checkbox"/>	M T W Th F

KID'S CLUB (3's, 4's, & K only)

Please Select
Schedule
For 5 Days

Please Circle
Your Selected
Days

PROGRAM	ANNUAL FEE PER DAY	ANNUAL FEE - 5 DAYS	5 DAY	SELECTION
3PM - 5:30PM	773	3,865	<input type="checkbox"/>	M T W Th F

LATE PICK UP FEE: \$25 PER OCCURRENCE

PAYMENT SCHEDULE

QUARTERLY DUE DATES (4 Total Payments):

MAY 1, 2022, SEPTEMBER 1, 2022, DECEMBER 1, 2022 & MARCH 1, 2023

MONTHLY DUE DATES (10 Total Payments):

MAY 1, 2022, JUNE 1, 2022, SEPTEMBER 1, 2022, OCTOBER 1, 2022, NOVEMBER 1, 2022, DECEMBER 1, 2022, JANUARY 1, 2023, FEBRUARY 1, 2023, MARCH 1, 2023 and APRIL 1, 2023

TUITION DISCOUNTS:

10% YOUNGER SIBLING DISCOUNT *

20% CHURCH MEMBER DISCOUNT *

DISCOUNTS DO NOT APPLY TO ADDITIONAL PROGRAMS INCLUDING EARLY DROP OFF, LUNCH BUNCH, CLUBHOUSE, AFTERNOON ENRICHMENT and KIDS CLUB

****ONLY ONE DISCOUNT CAN BE APPLIED PER FAMILY****

FINANCIAL ASSISTANCE:

NSK OFFERS A LIMITED NUMBER OF NEED-BASED SCHOLARSHIPS EACH YEAR AT THE DISCRETION OF THE NURSERY SCHOOL BOARD & THE DIRECTOR. APPLICATIONS ARE AVAILABLE IN THE MAIN OFFICE.

RIDGEWAY NURSERY SCHOOL & KINDERGARTEN

CREDIT CARD AUTHORIZATION FORM

(If paying tuition using a credit card, please fill out below & return)

Credit Card Authorization: I hereby authorize Ridgeway Nursery School & Kindergarten to charge my credit card for any and all tuition charges and additional fees as they come due.

All credit card payments are subject to a 2% processing fee with each charge.

Name (as it appears on CC):

Billing Address:

Phone Number:

Card Type (circle one):

MASTERCARD

VISA

Account Number:

Expiration Date:

CCV Code (3 digits on back of card):

BILLING ZIP CODE:

Signature:

Ridgeway Nursery School & Kindergarten 2022-2023 Tuition Payments and Refund Policy

Tuition Payments

Tuition payments may be made monthly or quarterly. Invoices will be emailed approximately two weeks before the due date. It is your responsibility to provide a valid email address and to make your tuition payments on time in accordance with your chosen payment schedule.

Registration Fee & Deposit

We accept your registration fee and deposit as a good faith representation that your child will attend Ridgeway Nursery School & Kindergarten for the upcoming school year and, on that basis, we reserve a space for your child. For this reason, **the registration fee and deposit are not refundable.** The deposit, however, will be applied to the final tuition installment of the school year as noted below.

Non-refundable Registration Fee	\$ 175.00 (New Families)	_____	(Initial)
Non-refundable Registration Fee	\$ 150.00 (Existing Families)		
Non-refundable Deposit	\$ 300.00 (Applied to final tuition payment)		

May 1st Tuition Payment

The first payment for the upcoming school year is due on May 1st. If the May 1st payment is not made by that date, **the space will be released and given to a child on the wait list.**

_____ (Initial)

Tuition Refund Policy for Discharges After May 1st and before Sept. 1st

If you choose not to send your child after the first tuition payment has been made, **a refund of the tuition payment will only be made if the school can fill the seat that had been reserved for your child.** Once the spot has been filled, you will receive a refund of payments made.

_____ (Initial)

Tuition Refund Policy for Discharges After Sept 1st and before Dec. 31st

If you choose not to send your child after Sept 1st and prior to Dec. 31st **a refund of 80% of the total tuition payment will only be made if the school can fill the seat vacated by your child.** Once the spot has been filled, you will receive your refund of payments made less any time your child has attended the school. **There will be no refunds after December 31, 2022.**

_____ (Initial)

On-Time Payment Policy

If your child's tuition payment is outstanding more than 30 days, your child will not be allowed to attend school until such time that the tuition is brought up to date. Termination of payments will be considered for reasons of the child's failure to adjust to the school/class when mutually agreed upon with the teacher and Director.

_____ (Initial)

Program Enrollment Policy

Ridgeway Nursery School & Kindergarten reserves the right to cancel a program due to lack of enrollment.

_____ (Initial)

I have read, understand and agree to the policies as set forth in this Agreement.

Name of Student: _____

Parent / Guardian Printed Name: _____

Parent / Guardian Signature: _____ Date: _____

RIDGEWAY NURSERY SCHOOL & KINDERGARTEN

SCHOOL POLICY STATEMENT

Ridgeway Nursery School & Kindergarten is open to all children regardless of race, creed, or ethnic origin. In order for a child to be admitted to the school, parents must provide signed copies of all relevant forms in the application packet.

TUITION AND FEES

Enrollment is on a yearly basis, with parents responsible for the tuition indicated by the Director at the time of enrollment. **If payment of fees is received later than 30 days from the due date, the child will not be allowed to attend the school until such time as the tuition is brought up to date or arrangements are made with the Director.**

If a child is not picked up promptly at his/her scheduled time, parents will be charged a late pick up fee of \$25. This is for the protection of the staff that have immediate responsibilities.

SIBLING & CHURCH MEMBER DISCOUNT

The sibling discount (2 children in the school at the same time) is 10% for the younger sibling. The Ridgeway Alliance Church member discount is 20% per child. Only **ONE** discount can be applied per family. **Discounts are applied ONLY to base tuition.**

CHANGES IN SCHEDULE

You may request a change to your child's schedule until **August 1, 2022**. If you are requesting a reduction in your child's schedule, changes can be made starting **January 2023**. Requests to increase the number of days in your child's schedule can be made at any time, provided that space is available. Changes in schedule must be authorized by the Director, based on staffing availability.

HEALTH

The children are given a routine health check each day upon arrival. Any COVID-19 mandates in effect will be followed by the school. Any child who shows symptoms of an illness will not be allowed to remain. Ridgeway is licensed to administer medication to your child with the appropriate NYS paperwork signed by the doctor, parent and Director.

LUNCHES AND SNACKS

Snacks are provided in the morning and afternoon and are within suggested nutritional guidelines. Lunch menus are published monthly and are approved by a dietician. Children requiring special diets must bring written instructions from a physician or bring their own lunch. **Ridgeway is a nut-free facility.**

DAILY SCHEDULE

Teachers develop lesson plans using suggested curriculum materials with a focus on weekly themes. The daily schedule includes, but is not limited to, free play, art, circle time, centers, outdoor play or indoor gym activities.

PARENT'S AGREEMENT:

I fully understand and accept the above Policy Statement and Tuition Schedule, and agree to pay Ridgeway Nursery School & Kindergarten in a timely manner for the 2022-2023 school year.

Child's Name: _____ Date: _____

Parent's Signature: _____

OVER →

**AGREEMENT BETWEEN PARENTS AND
RIDGEWAY NURSERY SCHOOL & KINDERGARTEN**

1. I give permission for Ridgeway Nursery School and Kindergarten to seek emergency treatment for my child.
2. I assume all responsibility for my children en-route to and from the school.
3. I understand that the school requires a registration fee and deposit upon submission of application that is **non-refundable**.
4. I fully understand the Tuition Schedule I have received and agree that I will make tuition payments by the due date as explained in the Policy Statement.

Non-payment of the May 1, 2022 fee will result in the forfeiture of my child's space at Ridgeway Nursery School & Kindergarten.

5. I understand that the first tuition payment is due May 1, 2022. If I choose not to send my child after this payment is made, a refund will only be given if my child's space can be filled.
6. Like all private schools, adjustments in payment cannot be made due to illness, holidays or snow days. No refund or discount is allowed because of temporary absence.
7. I understand that Ridgeway Nursery School & Kindergarten reserves the right to terminate a child for the following reasons (but not limited to): failure to pay, lack of parental cooperation, a difficult adjustment to school after a reasonable amount of time, lack of compliance with handbook regulations or the physical/verbal abuse of any staff, other persons, or property. All reasonable efforts will be made to assist children with their development. However, if the child's needs cannot be met by our credentialed staff, we will make every effort to work with the family to find a more suitable learning environment.

I HAVE READ, UNDERSTAND, AND AGREE TO THE POLICIES AS SET FORTH IN THIS AGREEMENT.

PARENT SIGNATURE: _____

DATE: _____

Ridgeway Nursery School & Kindergarten

EMERGENCY FORM

2022-2023

Child's Last Name: _____

Child's First Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: _____

Mom's E-Mail Address: _____

Dad's E-Mail Address: _____

Class in September 2022 (circle one): 2's 3's 4's K

Mother's Name: _____ Father's Name: _____

Mom's Cell Phone #: _____ Mom's Business Phone #: _____

Dad's Cell Phone #: _____ Dad's Business Phone #: _____

EMERGENCY CONTACTS (other than parents):

Name: _____ Phone #: _____ Relation: _____

Name: _____ Phone #: _____ Relation: _____

Doctor's Name: _____ Phone #: _____

In case of accident or illness, I request that the nursery school contact me. If I am unable to be reached, I hereby authorize the representative to call the physician indicated and to follow physician's instructions. If it is impossible to contact the physician, the school representative is authorized to make whatever arrangements are necessary including calling 9-1-1. I agree to assume financial responsibility for any diagnosis, treatment and / or medication deemed necessary. To the best of my knowledge all the information given is accurate and complete. By way of my signature, I hereby consent to and authorize the necessary procedures that have been stated above.

Name: _____ Signature: _____

ALLERGIES (please give detail): _____

Authorization for Pick-Up

The following people are allowed to pick up my child. Written permission must be sent to school if other pick up arrangements are required. Please include names and relationship:

NAME

RELATIONSHIP

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Parent Signature

Date

Photo Consent Form

During the school year, we will be taking photographs of the children as they work and play. Pictures will be used for teacher newsletters, class projects, bulletin boards, etc. Photos may also be displayed on our website and Facebook page. Children's names will not be used on social media.

Please indicate your preferences below (circle one):

- YES / NO My child may be photographed for school use as listed above.
- YES / NO My child may be photographed for school website.
- YES / NO My child may be photographed for Facebook.
- YES / NO Include my child's name and my email on a distributed class list.



RIDGEWAY NURSERY SCHOOL & KINDERGARTEN SPECIAL NEEDS QUESTIONNAIRE 2022-2023

The following questionnaire is to share information including any services your child is receiving or may need. This information will be shared with your child's teacher as we work together to provide the best school experience.

Child's Last Name: _____

Child's First Name: _____

Class in September 2022 (circle one): 2's 3's 4's K

Does your child have special needs based on an evaluation?

Yes No

If no, do you have concerns that would warrant an evaluation and if so, what are your specific concerns?

If yes, please specify the types of services your child will be receiving during the school year. Please check all that apply.

Occupational Therapy

One-on-one support (SEIT)

Physical Therapy

Speech

Please note the number of hours per week for which your child receives each service.



RIDGEWAY
NURSERY SCHOOL & KINDERGARTEN

Dear Parents:

As you know, Ridgeway Nursery School and Kindergarten is voluntarily registered with the New York State Education Department. As part of that registration, we need to provide information that pertains to your child's last dental check-up. This information will be kept in your child's confidential file. Please take a moment to complete the bottom section of this form and return it with your application.

If you have any questions or concerns, please feel free to contact me at 914.949.3134.

Thank you for your prompt attention to this request.

Sincerely,

Kimberly Emmert
Director

**Ridgeway Nursery School & Kindergarten
Dental Hygiene Information**

Child's Name: _____ Date of Birth: _____

Teacher's Name: _____

Date of most recent Dental Exam and Cleaning: _____

Name of Dentist: _____

Parent/Guardian Signature: _____ Date: _____

Ridgeway Nursery School & Kindergarten
465 Ridgeway, White Plains, NY 10605
phone: 914.949.3134 fax: 914.206.3805 email: gloria@ridgewaynsk.com



RIDGEWAY NURSERY SCHOOL & KINDERGARTEN

NAPPING AGREEMENT

2022-2023

Child's Last Name: _____

Child's First Name: _____

It is required that all preschools licensed by the Office of Children & Family Services (OCFS) have a signed napping agreement on file **regardless if your child is a half or full day student**. Please complete, sign and return with your application.

Children who nap will nap/rest in a designated classroom and will be supervised by at least one adult. Children rest at least 3 feet apart from one another. Teachers are able to move freely throughout the room to check on or meet the needs of each child.

At the beginning of the year each child who naps receives a mat that is used solely by that child. This time is a period of rest where many of the children sleep, but for those who do not, it is a quiet time with a toy or book until it is time for the next activity. If your child naps:

- He/she will rest on a school supplied rest time mat in their classroom, which is labeled with their name for **his/her use only** for the entire school year.
- You provide the blanket your child will use to rest.
- Due to limited space in the classrooms, the blanket must be compact and not comforter size.
- For the protection of the children, all blankets must be sent to school in a zippered package (e.g., separate backpack) labeled with your child's name. If blankets are not in packaging, the blanket will be returned to you.
- Rest time blankets **must** be laundered weekly and are returned to you at the end of each week. The blanket should be returned on Monday or your child's next school day.

I have read and understand the above information regarding nap time for my child:

Parent Signature

Date