

**DAYCARE REGISTRATION FORM**



**MILLS INSTITUTE**

*Mills Institute of Lifelong Learning and Success*

45 Marby Drive, Juba Sound

Telephone/Fax (649) 946-5563

Cellular: (649)-339-5563

*"Blazing the Trail for Academic Achievement"*

**Child's Personal Data**

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Name of Student \_\_\_\_\_

Male

Female

Date of Birth \_\_\_\_\_

Nationality \_\_\_\_\_

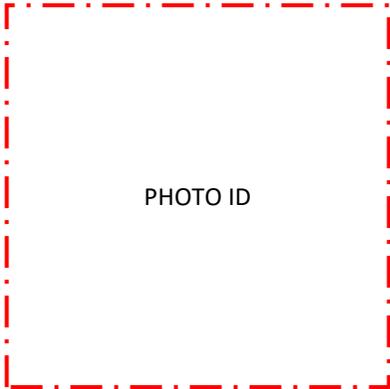
Grade of Entry \_\_\_\_\_

Previous School Attended \_\_\_\_\_

Religious Denomination \_\_\_\_\_

Hobbies or Special Talents \_\_\_\_\_

Recommended by \_\_\_\_\_



What are your child's nap times? \_\_\_\_\_

What are some of your child's likes and dislikes? \_\_\_\_\_

Describe your child's appetite    Excellent     Good     Fair     Poor

Is he/she potty-trained?    YES     NO

Approximate time your child will be collected from the nursery \_\_\_\_\_

Did your child attend a nursery before?    YES     NO

If Yes, where? \_\_\_\_\_

Please state any additional comments which you think will assist the Daycare in giving your child the best possible care (your personal do's and don'ts for your child

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1. *"I hereby give permission for my child to participate in advertisement of any related activities to promote the school"*

- YES
- NO

2. I also understand that the childhood illness such as colds and illnesses associated with teething are normal and to be expected for children transitioning from home care to Day Care. I will cooperate with the Day Care by keeping my child at home if he/she has a contagious illness to prevent the spread of illness.

**Parents' Personal Data**

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**Mother's Full Name**

**Mother's Nationality**

**Mother's Home Address**

Mother's Telephone Number (Personal)

Mother's Telephone Number (Work)

**Mother's Email Address**

**Mother's Place of Work**

**Mother's Occupation**

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**Father's Full Name**

**Father's Nationality**

**Father's Home Address**

Father's Telephone Number (Personal)

Father's Telephone Number (Work)

**Father's Email Address**

**Father's Place of Work**

**Mother's Occupation**

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**Name and phone number of person/s  
(other than parent/s) allowed to visit or  
pick up child from school**

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**MILLS INSTITUTE OF LIFELONG LEARNING AND SUCCESS  
FINANCIAL AGREEMENT**

I \_\_\_\_\_ agree to pay Mills Institute full tuition payment, which is non-refundable and payable on a monthly/termly basis, at the beginning of each term/month for my child \_\_\_\_\_.

Payment must be made by adopting the payment plan described in **Section four (4)** of this agreement, the payment will be due on that basis.

**LATE FEE PENALTY**

**I understand that statements will be sent out on or before the 1st of each month. I further understand that all payments are due within 5 days of the statement date. Accounts with balances over \$100.00 after the five-day grace period will be assessed a flat monthly late fee of \$75.00. The late fee may only be waived at the Principal's or Director's discretion and can be waived only once per term. If the 5th day falls on a weekend or public holiday, the payment must be made on or before the last business day before the 5th day. If payment is not received within the 5-day grace period, I understand that my child will not be permitted to attend classes until the Mills Institute has received full payment. Should full payment not be made within fourteen days of the statement due date, my child's space may be released to another student without further notice. I acknowledge that my child may be prohibited from sitting examinations if there is a balance on my account. Furthermore, I am aware that I may not collect report cards if there is an outstanding balance of any amount.**

**1. HOURS OF OPERATION**

Pre-K – Grade 6  
Nursery

8:30am - 2:30pm Monday – Friday  
7:30am - 5:30pm Monday – Friday

**2. AFTER CARE**

After care begins promptly at 3:00 pm. Students that are not picked up by this time will be sent to after care to be supervised and parents will be charged an after-care Fee of \$8.00 per day. This \$8.00 fee does not apply to the Nursery children.

**LATE PICK UP FEE**

A late pick up fee of \$50.00 will be charged to **ALL** students who are left at the school past 5:30 pm.

**3. REGISTRATION**

The registration fee of US\$75.00 is due with the signing of this agreement and is non-refundable.

#### 4. TUITION

I further understand that tuition is payable as follows: Please tick the required box.

DAYCARE	
<input type="checkbox"/> Term(due beginning of each term)	\$1,800.00
<input type="checkbox"/> Monthly(due beginning of each month)	\$600.00

#### 5. RE-REGISTRATION FEE:

A re-registration fee of \$35.00 (this may vary) is required from all students who will be returning to school for the new school year (September). If the fee is not paid by the last week in July, we will assume that the child will not be returning, and your child's seat will be made available to an incoming student.

#### 6. Tuition Changes

Fees and charges are subject to change at any time. Parents will be notified 30 days in advance of any changes. Tuition fees are to be paid promptly.

#### TERMINATION

A one month's notice is required if your child is leaving Mills Institute. At this time a final bill will be presented to you. If this final payment is not made by the final day of attendance, I agree to pay Mills Institute all cost of collection, including a reasonable attorney's fee, whether legal proceeding is brought or not and the arrears shall bear 10% interest per annum compounded.

#### 7. REMITTANCE

All payments must be made payable to Mills Institute at our First Caribbean account # 10477025. Confirmation receipt of payment must be sent promptly to [millsinstitute.payments@gmail.com](mailto:millsinstitute.payments@gmail.com). Failure to send in confirmation may result in your account being billed a late fee or your child being added to the stop list. You will receive a confirmation from our office once your payment is received and posted.

#### 8. ABSENCE

I understand that my child's absence from school will in no way waive my obligation to pay school fees or any outstanding fees. Once registered, school fees will not be prorated if a student is absent or late in returning to school at any time.

#### 9. TEMPORARY WITHDRAWAL (maternity leave, parents' vacation etc.)

Two weeks' notice of withdrawal is required. After the **first school day of any month**, if a child attends school, the parent is responsible **for the entire month**. Students who have been absent for a period of 30 days or more without notice, will be required to re-register and pay the \$75.00 registration fee upon their return. **A monthly holding fee of \$100.00 per month** is required if a child will be out of school for a period of 30 days or more.

**10. ACTIVITY FEE**

Occasionally, we will arrange special field trips or other activities to occur on or off the premises for the benefit of our students. These additional enrichment programs will be assessed a nominal fee and the parents will be notified in writing in advance.

**11. CREDIT APPROVAL**

Parents are required to sign a credit approval or permission slip in order for their child/children to credit lunch from the Tuck Shop. Parents’ written approval must be granted for students to attend aftercare and evening classes. All balances must be cleared when tuition is paid.

Parent’s Signature: \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE

**Official Use Only**

**Documents Checked: Tick All That Apply**

Birth Certificate <input type="checkbox"/>	Immunization Card <input type="checkbox"/>	Parents’ PRC <input type="checkbox"/>
Work Permit <input type="checkbox"/>	Belonger’s Status ID <input type="checkbox"/>	Parents’ Photo ID <input type="checkbox"/>
Student’s Passport Page <input type="checkbox"/>	Student’s Photo ID <input type="checkbox"/>	Transcript of Records <input type="checkbox"/>

Registration Fee Paid:      **YES**       **NO**

How School Fee Paid:      **Monthly**       **By Term**

Signature of School Official \_\_\_\_\_

Date \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_