TREASURE VALLEY FINE ARTS
PRESCHOOL

REGISTRATION PACKET

2026-2027 SCHOOL YEAR

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Date/Time Received:	Enrollment Fee Paid:	Official Enrollment Date:

1. PROGRAM SELECTION

☐ Tuesday/Thursday, ages 3-4 | 9:00-11:30 a.m. | $225 per month

☐ Tuesday/Wednesday/Thursday, ages 4-5 only | 9:00-11:30 a.m. | $310 per month

Additional Fees: A non-refundable $40 annual enrollment fee is required to secure enrollment. Annual supply fees are $100 for Tuesday/Thursday and $150 for Tuesday/Wednesday/Thursday. Supply fees are charged August 20, or upon enrollment for midyear registrations.

2. CHILD AND PARENT/GUARDIAN INFORMATION

Child's legal name:

Preferred name: **Birthdate:** **Age on first day:** **Gender:**

Home address:

Child lives with:

☐ Child's address is the same as Parent/Guardian 1

☐ Child's address is the same as Parent/Guardian 2

Custody, access, or release restrictions:

Supporting legal documentation must be provided when applicable.

Parent/Guardian 1

Full name: **Relationship to child:**

Address:

Email: **Primary phone:**

Parent/Guardian 2

Full name: **Relationship to child:**

Address:

Email: **Primary phone:**

3. EMERGENCY CONTACTS AND AUTHORIZED PICKUP

List two emergency contacts other than parents/guardians. Pickup authorization must be selected separately.

Emergency Contact 1

Full name: **Relationship to child:**

Primary phone: **Alternate phone:**

Authorized to pick up child: ☐ Yes ☐ No

Emergency Contact 2

Full name: **Relationship to child:**

Primary phone: **Alternate phone:**

Authorized to pick up child: ☐ Yes ☐ No

Additional Authorized Pickup Individuals

Name / Relationship / Phone:

Name / Relationship / Phone:

Name / Relationship / Phone:

Advance notice is required when someone other than a parent/guardian will pick up a child. Authorized individuals may be required to present photo identification before a child is released.

4. HEALTH, MEDICAL, AND TOILET-TRAINING INFORMATION

Child's physician: **Physician phone:**

☐ Immunization record attached ☐ Signed exemption/waiver attached

Does your child have any known health problems? ☐ Yes ☐ No

If yes, please explain:

Does your child have any known allergies? ☐ Yes ☐ No

If yes, please explain:

Does your child require medication, special care, or accommodations? ☐ Yes ☐ No

If yes, please explain:

Is there any other medical information or need staff should know about? ☐ Yes ☐ No

If yes, please explain:

Children with life-threatening allergies must have a separate allergy or emergency action plan on file. Prescription medication requires a separate authorization form and must be provided in the original labeled container.

I authorize the use of basic first-aid supplies (including but not limited to antibacterial ointment and band-aids): ☐ Yes ☐ No

Exceptions/details:

I authorize Treasure Valley Fine Arts Preschool to obtain emergency medical care for my child if necessary: ☐ Yes ☐ No

Any related medical treatment or transportation costs are the responsibility of the parent/guardian.

Toilet-Training Status

☐ Fully toilet trained ☐ Uses pull-ups ☐ May need bathroom assistance

Additional details:

5. PHOTO, VIDEO, AND COMMUNICATION PERMISSIONS

Please select one option in each category.

Classroom Photos and Videos

☐ YES - I authorize classroom photos and videos of my child for classroom activities, projects, keepsakes, and internal preschool use.

☐ NO - I do not authorize my child to be photographed or recorded.

Private Wonderschool App Sharing

☐ YES - I authorize photos and videos of my child to be shared in the private, invite-only Wonderschool group for enrolled families.

☐ NO - I do not authorize photos or videos of my child to be shared in the private Wonderschool group.

Public Promotional Use

Public promotional permission applies only when classroom photo and video permission is also granted.

☐ YES - I authorize select photos or videos of my child to be used on the preschool website, social media, flyers, or other promotional materials.

☐ NO - I do not authorize my child's image or video to be used publicly.

Children may appear incidentally in group photos, class projects, or keepsakes shared with enrolled families when classroom photo permission is granted. Children's names will not be included in public promotional materials without separate permission.

Essential preschool communication may be sent by email, text message, and the Wonderschool app. Families must keep contact information current and may not opt out of essential preschool communication.

6. TUITION, FEES, AND PAYMENT POLICIES

Preschool tuition is due on the 1st of each month from September through May. Autopay is required for all preschool accounts.

The $40 annual enrollment fee is non-refundable and must be paid before a child’s space is secured. Annual supply fees are charged August 20th. Midyear enrollees are charged the applicable supply fee upon enrollment.

Tuition is not reduced or refunded for absences, illness, vacations, holidays, severe weather, emergency closures, or other missed days. A 30-day written notice is required to withdraw.

Only tuition paid in full for the school year is eligible for a prorated refund of unused future tuition after the applicable withdrawal period.

7. EXTENDED PLAY AND EXTENDED DANCE

Select the options you are interested in below. TVFAP staff will help complete your child’s official enrollment through Dance Unlimited.Extended Play and Extended Dance enrollment and tuition are managed through Dance Unlimited. Dance Unlimited’s payment, withdrawal, refund, attendance, and related account policies apply.

Children may choose a combination of Extended Play and Extended Dance throughout the week, but may only participate in one option each day. Staff will escort children between preschool and dance classes and assist with changing for dance when needed.

Extended Play | 11:30 a.m.-1:00 p.m.

☐ 1 day per week | $85 per month | Requested day: ☐ Tuesday ☐ Wednesday ☐ Thursday

☐ 2 days per week | $160 per month | Requested days: ☐ Tuesday ☐ Wednesday ☐ Thursday

☐ 3 days per week | $225 per month | Tuesday, Wednesday, and Thursday

Extended Play days may be added throughout the school year as needed, subject to availability.

Extended Dance | $55 per class, per month

☐ Tuesday Ballet/Tap | 11:30 a.m.-12:15 p.m. | $55 per month

☐ Thursday Ballet/Tap | 11:45 a.m.-12:30 p.m. | $55 per month

☐ Thursday Hip Hop | 12:30-1:15 p.m. | $55 per month

A one-time costume charge is processed in October for each Extended Dance class.

> **Extended Dance enrollment closes September 30 and requires a commitment through the end of the school year. Dance Unlimited's billing, costume, attendance, and withdrawal policies apply.**

8. PARENT AGREEMENT AND ACKNOWLEDGMENTS

Please initial each statement.

Initials: ___ I understand enrollment is for the 2026-2027 preschool year and that 30 days written notice is required to withdraw.

Initials: ___ understand and agree to the tuition, fee, autopay, refund, and missed-day policies stated in this packet and the Parent Handbook.

Initials: ___ I will follow all drop-off, pickup, sign-in, sign-out, and authorized-release procedures.

Initials: ___ will promptly update contact, medical, custody, emergency-contact, and authorized-pickup.

Initials: ___ I will follow all illness and health policies, including keeping my child home when required.

Initials: ___ I understand TVFAP may suspend or end enrollment when necessary for the safety or wellbeing of the child, other children, staff, or the program.

Initials: ___ I understand Extended Play and Extended Dance are enrolled and billed through Dance Unlimited and are subject to Dance Unlimited's policies.

9. REGISTRATION CHECKLIST AND SIGNATURES

> **A child's space is secured when the completed registration packet and $40 enrollment fee are received. Autopay, immunization records or exemption, and all other required documentation must be submitted by August 20 or before the child's first day when enrolling after August 20.**

☐ Completed registration packet

☐ $40 annual enrollment fee paid

☐ Accept Wonderschool invitation (Used for student check in/out, classroom communication, payments)

- ☐ Download Wondershool App
- ☐ Autopay set up

☐ Immunization record or signed exemption/waiver submitted

☐ Any required allergy, medication, medical, or custody documentation submitted

I certify that the information in this packet is complete and accurate. I acknowledge that I have received, read, understand, and agree to follow the TVFAP Parent Handbook and the policies contained in this registration packet.

Parent/Guardian printed name: _____

Parent/Guardian signature: _____ **Date:** _____

Preschool administrator signature: _____ **Date received:** _____