Valley Early Education Reimagined (VEER)
Drop-In Day Program Enrollment Application Form
2025-2026

Valley Early Education Reimagined admits students of any sex, race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school, regardless of handicap. It does not discriminate on the basis of sex, race, color, disability, national and ethnic origin in administration of its educational policies and admissions policies.

Child's Name:	☐ Male ☐ Female	DOB:
Address (Street, City, State, Zip Code):		
Guardian's/Mother's Name:	Email:	
Business Phone:	Cell Phone:	
Work Address (Street, City, State, Zip Code):		
Guardian's/Father's Name:	Email:	
Business Phone:	Cell Phone:	
Work Address (Street, City, State, Zip Code):		
Child Lives with: ☐ Mother ☐ Father ☐ Both ☐ Guardian ☐ Other	Primary Language Spoken at Home:	
Previous School Attended:		

TERMS AND CONDITIONS

1._____ (initial) Registration fees are non-refundable

2._____ (initial) In order to complete enrollment at Valley Early Education Reimagined, a completed Application Contract is required to be submitted.

3._____ (initial) In the event enrollment is not completed, application and enrollment reservation is considered void and placement in Valley Early Education Reimagined is no longer guaranteed

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4. _____(initial) Application and enrollment reservation in Valley Early Education Reimagined is for the program indicated below.

5. _____(initial) The tuition for the drop-in day program is $75 per day

6. _____(initial) This application and enrollment reservation is for an intended start date of: _____

Classroom Group Options

Group A (2.5 years to 3 years old) ☐

Group B (3 to 4 years old) ☐

Group C (4 to 5 years old) ☐

Registration Fee of $150.00 is due upon submission of this application. If the child is not granted an enrollment reservation, the registration fee will be returned.

_____ _____

Parent/Guardian's Signature Date

For Office Use:

_____ _____

Director Date

Details: _____ _____ _____

Start Date Age Classroom Group

Valley Early Education Reimagined

ENROLLMENT AGREEMENT FOR THE 2025-2026 ACADEMIC YEAR

Valley Early Education Reimagined agrees to enroll _____

from _____ to 06/18/26 and to provide the educational and other services as prescribed for their grade.

Classroom Group Information _____

In consideration of the acceptance of this Enrollment Agreement by Valley Early Education Reimagined, the undersigned agrees to pay the required fees as specified below:

Choose One Option

Weekly Payment: ☐ Bi-Weekly Payment: ☐ Monthly Payment: ☐

I understand that my obligation to pay the fees for the full academic year is unconditional and that no portion of fees paid or outstanding will be refined or canceled in the event of absence, withdrawal, or dismissal from the school of the above student.

I understand that if I have used any tuition assistance and I decide to withdraw my child before fulfilling the entire committed term, I will forfeit the tuition assistance and whatever value the assistance amount happens to be, will be owed by me to the school.

This agreement is binding; however, we understand that situations change. In order to be released from further tuition obligations, a 30-day written notification of your intention to withdraw your child is required. Withdraws must contain an original signature. Fax, email, or verbal notice is not accepted. Withdraws are effective from the date the school receives the notice. You are responsible for the tuition for the remainder of the thirty (30) days.

I understand that in signing this Enrollment Agreement for the coming academic year, the parties hereto agree that the school makes all policies regarding operational and educational matters. I am agreeing to accept the rules and regulations of the school as stated in the current student handbook and the rules concerning payment of fees stated above. I understand that the fee for a returned check is $50. I also understand that the school shall have the right to pursue legal action for collection of school fees and that parents will be responsible for any costs of collection including court expenses and reasonable attorney's fees.

Unless notified in writing, I understand that the school may use my child's picture or his/her likeness in brochures, social media (i.e. Facebook page), and advertising materials without any monetary compensation.

I hereby give permission that the school may seek emergency medical treatment for my child in case a legal guardian cannot be contacted by phone. All expenses for such treatment are the responsibility of the legal guardian.

I hereby give my permission to the school to take my child on walking trips any time during the entire term of this agreement.

In order to reserve a place for your child, signed copies of this Enrollment Agreement and a non-refundable and a non-transferable payment in the sum of $ 150 must be received by Valley Early Education Reimagined no later than one week from enrollment .

This non-refundable payment includes:

- First Installment: _____
- Registration Fee: $150
- Total: _____

_____

_____

Valley Early Education Reimagined
ENROLLMENT AGREEMENT FOR THE 2025-2026 ACADEMIC YEAR

The signature below affirms that I have read, understood, and accepted the terms and conditions of this Agreement. This Agreement shall be interpreted in accordance with the laws of the State of Virginia.

Signatures of Parents / Guardians Financially Responsible for Student

Parent 1 Signature (Guardian)_____ Date: _____

Parent 2 Signature (Guardian)_____ Date: _____

ACCEPTED BY:_____ Date:_____