

# THE CARDEN CONEJO SCHOOL

975 EVENSTAR AVENUE  
WESTLAKE VILLAGE, CA 91361

## PRIMARY SCHOOL

(Pre-School, Pre-Kindergarten, Jr. Kindergarten)  
ENROLLMENT APPLICATION

NAME OF CHILD \_\_\_\_\_

SCHOOL YEAR 2021 - 2022 APPLYING FOR GRADE \_\_\_\_\_

A NON-REFUNDABLE **ENROLLMENT FEE OF \$100.00** MUST ACCOMPANY THIS APPLICATION

### PLEASE READ CAREFULLY

The Carden Conejo School is founded on American ideals and traditions, which have their roots in Christian principles on which America was founded. It endeavors to develop, through dedicated teaching of fundamentals, the superior capabilities of each student.

The School reserves the right of dismissal of any child who does not meet the expectations of the School.

The learning programs will be adapted to meet the health and safety requirements as deemed necessary by the Ventura County Health Department, including the possibility of virtual learning for all or part of the school year.

The School has many expenses of a continuing nature, such as faculty salaries and plant maintenance. In order to plan and maintain these services over the entire year, it is essential that the annual income and fees be assured. For this reason, it is understood that students are enrolled for the entire year or such portion as may remain after the date of entrance. Tuition for the whole of the enrollment period shall be deemed earned in full at the time the student attends his or her first class.

In view of the foregoing, no reduction or remission of fees can be allowed by the School for absence, withdrawal or dismissal. Because of this necessary regulation, the School requires the Tuition Refund Plan for those who pay less than one full year's tuition in advance. This plan protects the parents at a small cost in the event of absence or withdrawal from classes.

It is hereby understood that acceptance of this application for enrollment constitutes agreement for the undersigned parent or guardian to pay the full tuition and general fees for the school year. Tuition may be paid in equal monthly installments, in advance, the first payment becoming due and payable on July 1, 2021, and on the first of every month hereafter. All other fees and charges are due and payable on July 1, 2021. A delinquent charge of \$40.00 per month is added to all past due accounts.

The Parents and the Carden Conejo School further agree that continued enrollment of the child(ren) shall constitute a continuing agreement between the parties, with the parents obligated to pay to The Carden Conejo School the required full tuition and fees for the school year enrolled.

I also understand and agree that in the event I (we) default on any monies or payments herein agreed to be paid, the entire balance owing shall become immediately due and payable; and in the event it becomes necessary to engage an attorney or collection agency or to institute legal action to enforce the terms of this agreement, I understand that I will be liable to pay all collection agency fees, attorney's fees and costs of suit incurred by The Carden Conejo School.

Signing of this application gives permission for the student named above to take part in all school activities, including sports and trips away from school premises, and absolves the school from liability for any injury incurred by the student at school or during a school activity.

Parent or Legal Guardian \_\_\_\_\_  
Signature

Date \_\_\_\_\_

Application approved \_\_\_\_\_  
Director, the Carden Conejo School

Date \_\_\_\_\_

School will return a full-executed copy of this contract with the tuition invoice in June



# CARDEN CONEJO SCHOOL

975 EVENSTAR AVENUE, WESTLAKE VILLAGE, CA 91361  
805-497-7005

## Primary School Application

(for students entering Pre-School, Pre-Kindergarten, or Junior Kindergarten)

A non-refundable processing fee of \$100 must accompany this application.  
The receipt of the processing fee and the completed application ensures acceptance.

Student's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Student's Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone Number (         ) \_\_\_\_\_

Father's Name \_\_\_\_\_

Address (if different from student) \_\_\_\_\_

Cell Phone/Home Phone (         ) \_\_\_\_\_

Father's Email Contact \_\_\_\_\_

Mother's Name \_\_\_\_\_

Address (if different from student) \_\_\_\_\_

Cell Phone/Home Phone (         ) \_\_\_\_\_

Mother's Email Contact \_\_\_\_\_

Name of Legal Guardian (if different from parents) \_\_\_\_\_

Age Level Program for which you are applying \_\_\_\_\_

Religious Affiliation \_\_\_\_\_

Physical problems, if any \_\_\_\_\_

Number of Brothers \_\_\_\_\_ Ages \_\_\_\_\_

Number of Sisters \_\_\_\_\_ Ages \_\_\_\_\_

Which languages are spoken at home? \_\_\_\_\_

If there is a separation or divorce in the family, please complete the following:

With which parent does the child reside? \_\_\_\_\_

If joint custody, on which days does the child reside with either parent? \_\_\_\_\_

Which parent is financially responsible for the child? \_\_\_\_\_

To whom should school notices and reports be sent? \_\_\_\_\_

Step-Father's Name \_\_\_\_\_

Address (if different than the child) \_\_\_\_\_

Home Phone (        ) \_\_\_\_\_ Cell Phone (        ) \_\_\_\_\_

Step-Mother's Name \_\_\_\_\_

Address (if different than the child) \_\_\_\_\_

Home Phone (        ) \_\_\_\_\_ Cell Phone (        ) \_\_\_\_\_

**101200 Inspection Authority of the California Department of Social Services (the "Department"):**

**(b) The Department has the authority to interview children or staff without prior consent.**

**(1) The licensee shall ensure that provisions are made for private interviews with any children or staff members.**

**(c) The Department has the authority to inspect, audit, and copy child or child care center records upon demand during normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the requirements in Sections 101217(c) and 101221(d).**

**(1) The licensee shall ensure that provisions are made for the examination of all records relating to the operation of the child care center.**

**(d) The Department has the authority to observe the physical condition of the children, including conditions that could indicate abuse, neglect or inappropriate placement.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

For Office Use Only:

Date Received \_\_\_\_\_

Amount Received \_\_\_\_\_