



Marysville Cooperative Preschool

10110 59th Drive NE, Marysville, WA 98270
 (360) 657-0636 www.marysvillepreschool.org

Deposit Received:

Preregistration Form

1. I understand and agree to the following guidelines as set in the Bylaws of the Marysville Cooperative Preschool.
2. Returning families must register and pay a deposit by January 31st in order to have a position saved for their child in the upcoming school year.
3. I understand that my deposit is **non-refundable**.*

	Preschool (3-5 years old) Pick One and Circle Work Day Preference	2's (2-3 years old) Circle Work Day Preference
	AM Class 9:30-11:30a Monday – Wednesday M T W PM Class 12:30-3pm Monday – Wednesday M T W	Thursday, Friday 9:30-11:30 Th F
Deposit Due	\$60 non-refundable registration	\$60 non-refundable registration
Tuition (monthly)	AM \$130.00 (9 payments, Sept-May) PM \$140.00 (9 payments, Sept-May)	\$90.00 (9 payments, Sept-May)
Class Participation	One day per week to cover a work area	One day per week to cover work area
Parent Education	Participate in parent education discussion during monthly meetings	Participate in parent education discussion during monthly meetings
Meetings	Attend fall orientation and monthly evening meetings	Attend fall orientation and monthly evening meetings
Weekend Cleaning	One or two times per year	One or two times per year
Deep Cleans	\$40 refundable deposit due in Sept and returned when member shows up for 2-hour shift at year-end clean.	
Member Job	Hold a member job, serve on a committee or serve as an officer on the Board.	
Fundraising	Support fundraising by helping to run approved fundraising event(s); Participate in fund-raising event(s) to earn commitment funds, or choose a buy-out option	
Snack	Provide snack on a rotating basis	
Withdrawal	Give two weeks notice if withdrawing from program and fully participate (fulfill commitments) during those two weeks	

The Cooperative Preschool admits students of any race, color, or national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at our schools. We do not discriminate based on race, color, or national and ethnic origin in administration of our educational policies, admissions policies, scholarship and loan programs, and athletic and other school administered policies.

Child's Name: _____ Birthdate: _____

Parent/Guardian Name(s): _____

Address: _____

Phone Number(s): h: _____ c: _____

Email (used frequently for communications) _____

Signature: _____ Date: _____

How did you find out about our program? (circle): Online Flyer Friend Other: _____

Mail Preregistration and Deposit to:
 Marysville Cooperative Preschool, 10110 59th Dr. NE, Marysville, WA 98270