MICROSOCIETY ACADEMY CHARTER SCHOOL
Preschool Application - HALF-DAY OPTION

Registration: Application for enrollment is open to all children who meet the age requirements for our program. Children must be 4 years old by September 30th.

In order to be eligible for enrollment for the 2026-2027 school year, please submit the following to MACS:

- ☐ **Completed Preschool registration form (this packet)**
- ☐ **Non-refundable registration fee of $100 (required to hold your child's spot)**
- ☐ **A copy of the child's birth certificate or passport**
- ☐ **Current health form, including immunizations and date of last physical**

Half-Day Program:

- Morning session: 9:00 AM - 11:45 AM
- Afternoon session: 12:15 PM - 3:00 PM

Tuition Payments:

- Tuition for our half-day, full academic year program is $154/week, or $4,928/academic year
- The tuition for the year is divided into 9 installments due on the 15th of the month, August through April or paid in full for the year
- Tuition payments can be mailed or dropped off in the main office
- Checks should be made payable to MACS and addressed to 589 West Hollis St. Nashua, NH 03062. Please be sure to include your child's name on the check to ensure that your check is credited to the proper account.
- A $25 late fee is charged for any payment made after the first of the month
    - Two monthly late fees in a row is subject to loss of a spot
- Credit card payments (subject to 3.5% fee), cash and checks payable to MACS are accepted

Withdrawals/Refunds:

- Please notify the School Principal via email as soon as possible when a child is to be withdrawn.
- The registration fee is strictly non-refundable
- Parents are obligated to pay tuition for four weeks after the child's last day of attendance or after the withdrawal notification date, whichever occurs later.
- Reimbursement for families who pay for the year in full will be prorated accordingly.

Disclaimers:

- Entry into our preschool program does not guarantee entry into our K-8 program. Entry for kindergarten or subsequent grades remains a lottery process, meaning you will have to reapply for the following school year. However, per our policy, siblings do get first priority in the lottery process.
- Information requested in this application is not intended and will not be used to discriminate. MACS does not discriminate based on gender, race, color, national origin, religion, disability, familial status, parental status, or sexual orientation in its educational programs or admissions procedures.
- Admissions will be offered to current MACS families for two weeks prior to opening up admissions to the public
- MACS is not a special education approved program

Program Contacts:

If you have any questions regarding the educational program, please contact Susannah Williams, School Principal, at swilliams@macsnh.org

If you have any financial questions, please contact Kim Plummer, Executive Assistant to the Head of School/Bookkeeper, at kplummer@macsnh.org

If you have any questions regarding attendance, or need to call your child in absent, please contact the Main Office at the Lower School at 603-595-7877.

If you have any medical questions or concerns, please contact the School Nurse, Ashlie Boudreau, at the Lower School - 603-595-7877 or aboudreau@macsnh.org

Please <u>print clearly</u> when completing this application.

Student Name: Last _____ First _____ MI ____

Student Date of Birth: _____/_____/_____ **Student Gender:** M / F

Parent/Guardian Name: _____

Relation to Student: _____

Cell Phone: _____ **Email:** _____

Address: _____**City**_____**State**_____**Zip**_____

Parent/Guardian Name: _____

Relation to Student: _____

Cell Phone: _____ **Email:** _____

Address: _____**City**_____**State**_____**Zip**_____

Emergency Contact: _____

Relation to Student: _____

Cell Phone: _____ **Email:** _____

Address: _____**City**_____**State**_____**Zip**_____

Student currently lives with: _____

<u>Please circle which session you are applying for:</u>

Morning session: 9:00 AM - 11:45 AM Afternoon session: 12:15 PM - 3:00 PM

I, _____, confirm that I have read the policies and procedures as explained on this form.

Signature: _____ **Date:** _____