NPHX Preschool Parent Contract 2025-2026

We offer three schedules (Days and T their needs. Please let us know which	imes) that families can choose from in order to meet days and times you are enrolling.		
I, am enrolling my child (Parent/Guardian Name, please print) (Child's Name, please print) in the following program at NPHX Preschool.			
 Days: Monday through Friday Monday, Wednesday, and Friday Tuesday and Thursday Other M TWTHF 			
Times: Full-Day, over 4.5 hours a day Half-Day, up to 4.5 hours a day (must be picked up by 2:00 pm) Morning Schedule, 9:00 AM to Noon only (Children 3 and older only)			
Handbook. Signing below indicates agree	cies in the NPHX Preschool and Kindergarten Family ement to the policies. The Family Handbook can be found at ources. A hard copy is available in the preschool office.		
Parent/Guardian Signature	Date		
Director Signature	Date		
PAYMENT SCHEDULE	OFFICE USE ONLY		
MONTHLY	WAITLIST PAID		
WEEKLY	REGISTRATION PAID		
PAYMENT AMOUNT:	START DATE		
\$	ROOM #		



Family Handbook Acknowledgement Form

	Initial	
I understand and agree that it is my responsibility to read and familiarize myself with all of the policies and procedures outlined in the Family Handbook.		
I understand that it is my responsibility to go directly to the administration team with any questions I may have regarding the policies, procedures, and information contained in the Family Handbook or enrollment paperwork.		
I understand that it is my responsibility to drop off between the hours of 7:00 am and 9:30 am. If my child will be late or has an appointment, I will notify the administration team by calling the office or sending a message through Brightwheel.		
I understand that if my child shows any signs of illness or is diagnosed with an Illness, it is my responsibility to call the preschool office so that they can document the symptoms and or diagnosis.		
I understand that it is my responsibility to provide my child with a nutritious lunch each day per the guidelines laid out in the schools meal policy. Lunch suggestions can be found on the preschool website under parent resources.		
I understand that payments are due at the beginning of each week or the 1 st of each month depending on my child's schedule.		
I understand that there are no credits given for sick or vacation days, holidays, or early closures due to staff training, inclement weather, or environmental issues. Special Medical circumstances will be given consideration with the Directors approval.		
Information in the Family Handbook may be subject to change to fit the needs of the program, children, and families that we serve; as well as changes in licensing requirements by the state of Arizona.		
Child's Name		
Parent Signature		
 Date		