



off Broadway
PRESCHOOL
of fine arts

1235 Pine Street
 Boulder, CO 80302

(303) 800-0324
 info@offbroadwaypreschool.org

Enrollment Application

2019/2020 Tuition Rates and Associated Fees

	½ Day Preschool 8:30-12:30	Full Day Preschool 8:30-3:30	Extended Hours 8:00-5:30
2 Day	\$400 (T/Th)	\$585	\$735
3 Day	\$560 (M/W/F)	\$850	\$1060
4 Day		\$1105	\$1385
5 Day		\$1305	\$1630

**Please note that tuition rates include all of the child's food, supplies/materials, and daily morning enrichment classes.*

Tuition will be due in 10 equal monthly installments, or may be paid early at any time. Summer Camp enrollment is separate. If siblings are enrolled at the school concurrently, a 5% discount will be applied to the older child's tuition.

Tuition is due on the 1st of every month. When the 1st falls on a non-school day, tuition is due on the following school day. A \$25 late fee applies to payments received after the 5th of the month. If a monthly payment is not made by the end of the month, children are subject to suspension effective the 15th of the following month. Delinquent accounts will be sent to collections after 30 days.

Tuition refunds will not be issued. If a child misses a day, or the school is closed for weather related reasons, a holiday, or a teacher work-day full tuition is still due.

Rates are reviewed each Spring, with new tuition rates set to be enacted on September 1st.

Application Fee: A \$50 nonrefundable application fee may be applied towards the child's enrollment fee if there is a space available and you choose to enroll your child. If space is not available at the time of application, the child will be placed on our waitlist.

Enrollment Fee: A \$150 enrollment fee is required to enroll each child, once the child's application has been accepted and there is a space available.



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We accept the following tuition assistance programs: CCAP, GAP, and CLIFF.

Today's Date _____

Anticipated Date of Enrollment _____

Desired Schedule (Please Circle)

½ Day

Full Day

Extended Hours

Monday

Tuesday

Wednesday

Thursday

Friday

Child's Name _____

Child's Birthday _____

Gender M F

1st Parent's Name _____

2nd Parent's Name _____

Telephone _____

Telephone _____

Email _____

Email _____

Child's Address _____

City, State, Zip _____

Siblings: Name

Age Gender

For Office Use:
Date Received: _____
Tour Date: _____
1st Day _____

Please describe your child's current or past school or daycare experience, if any:



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Do you have concerns about your child from past school, daycare, or group experience? Please describe:

Why are you considering Off Broadway Preschool for your child?

How did you hear about our program?

Please give a description of your home situation and daily rhythm:

Please describe your child's strengths:

Please describe any aspect of your child that you would like to see strengthened:

Please describe how your child plays alone and with other children:

Please describe your child's development regarding the following:

Putting on shoes, coat, and pants

Toilet training (*Please note that children enrolled in our program must be potty trained.*)

Anything else you'd like to add? (Please add paper if you need to.)

Off Broadway Preschool does not discriminate on the basis of race, color, religion, national or ethnic origin in the administration of its educational policies, admissions policies, scholarship and loan programs, or any school administered programs.