



ENROLLMENT FORM 2018-19

Theatre in English workshop

Please select your preferred time

Student Last Name _____

Student First Name _____

Sex M ☆ F ☆

Date of Birth DD/MM/YY _____

Group: _____

Lesson day & time: _____

Tuesday 15h30

Tuesday 16h30

First & Last Name: Parent 1 _____ Parent 2 _____

Name and telephone number of other responsible adult (i.e. grandparent, babysitter): _____

Preferred cell phone: relation to child: _____

Secondary cell phone: _____ relation to child: _____

Home telephone: _____ Student's phone: _____

Preferred email address:

Secondary email address: _____

Student's email address: _____

Street address: _____

Postal code and city: _____

School / grade: _____

How did you hear of L'École Koenig? _____

** Email is our primary means of communication with parents.**

By signing below I certify that I have received and understood the following registration documents:

- * Enrollment Form (to be returned completed and signed)
- * School Policies (to be returned completed and signed)
- * Safety & Permissions Form (to be returned completed and signed)
- * Payment Terms & Conditions Form (to be returned completed and signed)
- * Reimbursements, Discounts & Mid-Year Enrollments Form (to be returned completed and signed)

Signature _____

Date _____

Family Last Name: _____

ENROLLMENT *checklist* 2018-2019

Theatre (*for ages 4 and up*)

Important:

Please complete the following checklist to ensure that your child's enrollment is processed. Incomplete enrollment packets will not be accepted.

1: Enrollment Form

completed, signed and dated

2: School Policies

signed and dated by the parents & students 12 years or older

3: Safety & Permissions form

Image Rights signed and dated (if applicable)

Disclaimer of Liability signed and dated (if applicable)

4: Payment Terms & Conditions form

completed, signed and dated

5: Reimbursements, Discounts & Mid-Year Enrollments form

completed, signed and dated

6: Payment

1 annual payment or 2 semestrial payments

* **Enrolling in person:** You will need your checkbook, credit card or RIB (bank details).

* **Enrolling by mail:** Refer to our "Payment Terms & Conditions" to correctly complete your checks, or complete the credit card authorization/SEPA mandate form.

Thank you!

Your enrollment for 2018-2019 is now ready to be processed.

School Policies 2018-2019

Full-Year Enrollment and Commitment L'Ecole Koenig requires a **serious commitment** from both students and their families regarding regular instrumental practice at home as well as regular classroom attendance. **Especially when students are young, parents need to help them find time to do their homeworks.** Numerous changes during the course of the year are detrimental to the pedagogical programs and time slots reserved at the beginning of the year are difficult to change. It is for these reasons that we require an annual enrollment and the same commitment is equally demanded of your child's teacher.

Global Planning Students are part of a global structure; class times are therefore subject to be modified by 15 minutes. L'Ecole Koenig reserves the right to cancel any group course due to insufficient enrollment. Such decisions will be made at least one week before classes begin in September.

Punctuality **For the respect of all, lesson times must be scrupulously respected.** Lateness offsets the schedule and punishes those children who are on time.

Absences and Makeup Lessons **Makeup lessons are only automatic when the teacher is absent.** The teacher, according to his/her schedule and in agreement with the school administration, determines the time and date of make-up lessons. Individual lessons missed by the student for valid reasons (illness, accident) with justification and notification at least 48 hours before the lesson time may be made up **if the teacher's schedule allows and a room is available.** Beyond the 48-hour time limit, we cannot guarantee that the lesson will be made up. **A maximum of 2 absences per semester will be tolerated.** Above and beyond two absences, L'Ecole Koenig reserves the right to cancel the student's participation in the class since these absences penalize the group's work.

Behavior Any **inappropriate and troublesome behavior** of a student, especially occurring in a group class, will be notified to his/her parents. L'Ecole Koenig will reserve the right to cancel the enrollment of any student disrespectful towards his/her teachers and causing trouble in class. The same applies to any inappropriate behavior coming from the parents of students towards the school administration or teachers.
Music lessons must take place in the best conditions, therefore it is strictly forbidden to scream or run inside the school; cell phones should be set in silent mode. Students cannot **picnic** inside the school.

Note: Classes are not systematically conducted in English, and L'Ecole Koenig is not a language school.

I, the undersigned, _____ (parent's name) have read, understood and agreed to the School Policies of L'Ecole Koenig.

Signature parent/guardian: _____ Date : _____

Signature student (12 years & older): _____

Safety & Permissions 2018-2019

For security reasons, strollers, scooters, carts or rollerblades **must not obstruct the entryway and the hallway** of L'Ecole Koenig. In case of the need for an emergency evacuation (e.g. fire or explosion), your personal liability may be invoked.

Parents and children must therefore leave any such items outside the school. Bicycles, strollers, and scooters must be attached using a lock, as L'Ecole Koenig takes no responsibility for lost or stolen personal items, neither in front of nor within the school.

It is strictly forbidden by law to park in front of the entrance of the building parking located right next to the school entrance.

L'Ecole Koenig is responsible for students only during class times. Non-autonomous students (under 8 years old according to French law) must be in the charge of a responsible adult who accompanies and picks up the child on time. We advise you to introduce yourself, and/or the third person responsible, to your child's teacher and to the school administration at the beginning of the school year, and to inform us immediately should there be a change in the person designated to pick up and drop off your child.

For autonomous children between the ages of 8 and 15, we require that the Disclaimer of Liability form below be completed and signed. The school administration must be **notified by a responsible adult of any absence** of children of this age. L'Ecole Koenig and its staff decline any responsibility for students not on school grounds. We remind you that it is extremely dangerous for your children to play in front of the parking lot's exit. *In the event that L'Ecole Koenig is forced to intervene to protect a child who, in the opinion of school administration, is in danger or is disruptive, L'Ecole Koenig may require that the child be systematically accompanied in the future.*

Disclaimer of Liability

Authorization to Leave School Premises Unaccompanied

I, the undersigned, _____ (parent's first & last name), authorize my child,

_____ (child's first & last name), aged _____ years old, to leave the
premises of L'Ecole Koenig after his/her music/musical theater class unaccompanied by an adult.

Date : _____ Parent Signature : _____

Image Rights

I, the undersigned, _____ (parent's first & last name), authorize L'Ecole Koenig to
photograph & film my child, _____ (child's first & last name) individually in a group
 to the attention of current & future members on our website & the associations' blog ;
 for pedagogical use in the classroom.

Only first names will be indicated.

I recognize that this document is legally contractual. This document can be declared invalid by certified letter addressed to L'Ecole Koenig.

Date : _____ Parent 1 Signature : _____

Date : _____ Parent 2 Signature: _____

Insurance

In case of an accident resulting in damaged or broken instruments belonging to L'Ecole Koenig, the parents' insurance policy (*responsabilité civile*) will be responsible for covering any costs resulting from the accident.

Date : _____ Parent Signature : _____

Payment Terms & Conditions 2018-2019 – for 34 weeks of classes

Standard Plan 15€ membership dues + 750€
(per semester)

The following 2 payments must be returned to confirm enrollment:

2 checks in the amount of 390€ each, the first to be cashed upon enrollment and the second of 375€ to be cashed on January 5th, 2019.

Annual Plan 15€ membership dues + 750€
(annual)

The following payment must be returned to confirm enrollment:

1 check in the amount of 765€ to be cashed upon enrollment.

- Checks must be **written to « Les Amis de l'Ecole Koenig »**.
- We also accept payment by **credit card** (other than American Express) and by **automatic bank transfer**.
- To choose one of these options and for further information, see page 6 of this enrollment package.
- **Membership in our association 'Les Amis de L'Ecole Koenig'** entitles you to attend the general assemblies of the association and all school events. As a member you are entitled to a special member rate when these events require paying a fee.
- All rejected payments, for any reason, will incur a **25€ penalty fee**.

I, the undersigned, _____ (first and last name) have read, understood and agreed to the Payment Terms & Conditions of L'Ecole Koenig, and have chosen the:

standard plan / extended plan / annual plan .

I choose to pay by check / by credit card / by automatic bank transfer

Date: _____ Signature: _____

Reimbursements, Discounts & Mid-Year Enrollments 2018-2019

- Reimbursements

Each semester is due.

In the case of a cancellation meeting any of the criteria below:

- 1) Documented conflict with your child's academic coursework schedule before classes begin in September.
*Scheduling conflicts with school field trips and other extracurricular activities, such as sports, dance or art classes, will **not** be considered valid grounds for refund of the tuition downpayment*
- 2) Moving - to be notified in writing at least 3 months in advance (administrative proof required)
- 3) Long term sickness or hospitalization (medical certificate required),

L'Ecole Koenig will pro-rate the tuition and refund it **with the deduction of the membership due and registration fee** per check at the end of the semester. If necessary it will return the non-debited checks or the signed authorization form given in advance by the family.

- Mid-year Enrollments

**Any enrollment after classes begin:
The tuition must then be paid in full.**

***Enrollments before the October vacation:** the full tuition is due.

***Enrollments after the October vacation:**

- ✓ The membership dues as well as the registration fee are due.
- ✓ Tuition is calculated based on the number of weeks taught.

- Discounts

Enrollment in a **second child** from the same family the Mandarin course, entitles the family to a **10% reduction** applying to the second enrollment. The same policy applies to a **third child, with a 20% reduction.**

Date: _____ **Parent 1 Signature:** _____

Date: _____ **Parent 2 Signature:** _____

Family Last Name: _____

Payment Authorization 2018-2019 by Credit Card or Automatic Bank Draft for the balance payment

By completing this form, I authorize L'Ecole Koenig to

charge my credit card

debit my bank account

1 payment of 765 €, to be charged upon enrollment.

2 semestrial payments of 390€ and 375€, the first payment to be charged upon enrollment and the second on January 5th, 2019.

I understand that it is my responsibility to provide updated credit card information in case of expiration or new bank account data in case of account closure, and that an administrative of 25€ surcharge will apply in the event of any unauthorized charge.

Nom: _____

Date: _____

Signature: _____

CREDIT CARD DATA

Credit Card # _____

Expiration Date: _____

Secret Code (3 numbers on back of card) : _____

Name appearing on the card: _____

Signature appearing on the card: _____

SEPA DIRECT DEBIT MANDATE – *please attach your bank data here*

Mandate reference:

Name: _____

Address: _____

Postal code: _____ City : _____ Country : _____

Account number:

- **IBAN** (International Bank Account Number):

- **BIC** (Bank identifier Code):

- Bank agency's name and address: _____

Creditor's name :

Les Amis de L'Ecole Koenig - 33 rue Fondary - 75015 Paris - France

Creditor's bank's name and address :

Crédit Coopératif 122, bd. Saint-Germain 75006 Paris – France

ICS (Identification Création SEPA): N° **FR57ZZZ552563**

Type of payment : recurrent payment one-off payment

Date _____

Signature _____

By signing this mandate form, you authorize Les Amis de L'Ecole Koenig to send instructions to your bank to debit your account and your bank to debit your account in accordance with the instructions Les Amis de L'Ecole Koenig. As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited. Your rights are explained in a statement that you can obtain from your bank.

Note: Your rights regarding the above mandate are explained in a statement that you can obtain from your bank.