



For office use only:

Student Status

NEW RETURNING

Mid-Year Enrollment

CLASSROOM:

START DATE:

# DIA 23-24 GUARANTEED Enrollment

*Must be accompanied with DIA's Family Application form.*

CHILD NAME: \_\_\_\_\_  
FIRST LAST

NICKNAME: \_\_\_\_\_

BIRTHDAY: \_\_\_\_\_

GENDER: Male \_\_\_ Female \_\_\_

Sibling(s) currently attending DIA (if applicable): \_\_\_\_\_

*ALL programs are FULL DAY, up to 10 hours daily care allowed*

*Opening Hours: 7:00am - 5:30pm, Monday - Friday*

*Students must be of age by September 1, 2023 (by October 31 for the 1's program - responsible for tuition from start of school year)*

*Classroom placement is based upon a student's birthday, developmental needs and teacher observations.*

<b>12 - month</b> <i>All programs</i> <b>August 7, 2023 - July 26, 2024</b> <i>Summer of Discovery INCLUDED (June &amp; July)</i> <i>*Deposit is exclusively applicable to July 15-26, 2024</i>	<b>10-month</b> <i>3's and 4's programs ONLY</i> <b>August 7, 2023 - May 23, 2024</b> <i>Summer of Discovery NOT INCLUDED (addition registration req.)</i> <i>*Deposit is exclusively applicable to May 13-23, 2024</i>
One's (1) Program ___ (12 - 24 months)  Two's (2) Program ___ (24 - 36 months)  Three's (3) Program ___ (36 - 48 months)  Four's (4) Program ___ (48 - 60 months)	Three's (3) Program ___ (36 - 48 months)  Four's (4) Program ___ (48 - 60 months)
<b>Interested in Summer of Discovery?    Y    N</b> <i>Registration details will be available Early Spring 2024</i>	
<b>TUITION DEPOSIT ACKNOWLEDGMENT*</b> <i>Non-refundable 30 days after receipt OR immediately upon start date (whichever comes first). Any refunds will incur a \$10 processing fee.</i> \$640 ___ ( 1's and 2's, 12-month) \$16,320 annual cost \$620 ___ (3's and 4's, 12-month) \$15,810 annual cost \$655 ___ (3's and 4's, 10-month) \$13,755 annual cost <b>REGISTRATION FEE</b> (non-refundable upon submission) \$150 ___ (NEW Family) <span style="float: right;"><i>check here if:</i></span> \$75 ___ (RETURNING Family) <span style="float: right;">Multiple Children</span>	<b>PAYMENT METHOD</b> (please circle one) <i>*ACH/Credit Card authorization form required for new accounts</i>  Cash  Check  Bank Draft: (use same on file)___ (new account)___  Credit Card: (use same on file)___ (new account)___ <i>(additional 3% fee applies)</i>
<b>TOTAL DUE:</b> _____	

PARENT SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

*Daniel Island Academy does not accept medical or religious immunization exemptions.  
All policies and terms published in the DIA Parent Handbook apply.*

300 Seven Farms Drive, Daniel Island, SC 29492  
843-971-5961

10.18.2022