PRESCHOOL TUITION AGREEMENT

**The following tuition agreement will determine your weekly tuition payment. The same weekly tuition payment is always made unless vacation time (refer to General Policies) is being used. Tuition is to be paid in advance of attendance. FEES ARE SUBJECT TO CHANGE.

| , | | | | | 0.00/family 1.00/child | | |
|--|--|--------------|------|--|----------------------------|--------------------------|--|
| DAILY (Less than 5 days at 4-10 hours/day) \$54. HALF-DAY (Up to 4 hours) \$42. | | | | 35.00/week 4.00/day 2.00/day 6.00/day | | | |
| EXTENDED CARE/DROP-IN \$10.0 | | | | | | 0/hour or any portion of | |
| FIELDTRIPS Poste | | | | | the hour. sted per trip | | |
| **Maximum charge is \$235.00 for full week and \$54.00 for full day per child. ** After Center closes at 6:00pm, \$5.00 is charged for 1 st 5 minutes, \$10.00 is charged for each additional 5 minutes. | | | | | | | |
| | ATTENDANCE | MON | TUES | WED | THURS | FRI | |
| | ARRIVAL | | | | | | |
| | DEPARTURE | | | | | | |
| | | Weekly Rate: | | | \$ | | |
| | Weekly Rate (inc. mult. Child discount): | | | | nt): \$ | \$ | |
| Total Weekly Tuition Payment in ADVANCE: | | | | \$ | \$ | | |
| ***I have received and agree to the above Tuition Agreement and the General Policies. | | | | | | | |
| Starting DateChild's Name | | | | | Birthdate_ | Birthdate | |
| Today's DateParent Sig | | | | | \$60 | \$60 Reg | |
| Supply Fee Parent Phone # | | | | | | | |

^{**}There is a 2 day minimum attendance for all schedules.