



PAYMENT AGREEMENT

Child's Name: _____ Enrollment Date: _____

Child's Date of Birth: _____ Child's Age: _____

Child's Classroom Assignment: _____

Days Your Child Will Be In Attendance: Circle All That Apply: M T W TH F

Hours of Attendance: _____ AM to _____ PM

Weekly Tuition Amount (Select One Below):

Infants (6 weeks through 12 months):

____ 5 days = \$205 ____ 4 days = \$195 ____ 3 days = \$185 ____ 2 days or less = \$175

Ages 1 through 3:

____ 5 days = \$195 ____ 4 days = \$185 ____ 3 days = \$175 ____ 2 days or less = \$165

Ages Four and Five:

____ 5 days = \$185 ____ 4 days = \$175 ____ 3 days = \$165 ____ 2 days or less = \$155

Part Day Preschool Program (ages 3 to 5 ~ 9 am to 12 pm M-F) (Buckson Drive location only):

____ Part Day Preschool = \$90 per week

Before and After School Care Program (Buckson Drive location only):

____ Before or After Care = \$65 per week ____ Before and After Care = \$105 per week.

School Age Summer Program/ Full Week School Age Program (Buckson Drive location only):

____ 5 days = \$175 ____ 4 days = \$165 ____ 3 days = \$155 ____ 2 days or less = \$145

- Applicable Discounts, if any: (sibling, incentive, employee's child, referral bonus credit, military, etc): _____
- Total Weekly Tuition Rate: _____
- Advance Tuition Payment Deposit Amount Due (Equal to First Week's Tuition Payment): _____
- Payment Type (Select One Below):
 - ____ Private (Parent Pays)
 - ____ Purchase of Care (State Pays)
 - ____ Purchase of Care Plus (State Pays a Portion, Parent Pays the Remainder)
- Advance Tuition Payment Deposit Paid On (Date): _____ with payment method of: _____
- Registration Fee of \$25 Paid on (Date): _____ with payment method of: _____
- Weekly Tuition Payments of (Amount) _____ to begin on (Date): _____

Please note: We reserve the right to recover any and all costs incurred in the collection of delinquent accounts. We require a non-refundable registration fee along with a non-refundable advance tuition payment deposit, which is equal to one week's tuition and which is applied to your child's first week of enrollment, to be submitted in order to hold your child's spot at the center. If you choose not to enroll you lose the advance tuition payment deposit and registration fee.

Parent/Guardian Signature: _____ Date: _____