Wonder Nest Academy

Enrollment Agreement

Child's Name: _____

Date of Birth: _____

Classroom: _____

Enrollment Date: _____

Parent/Guardian Name(s):

_____

Phone: _____

Email: _____

Tuition & Payment Agreement

I understand that tuition reserves my child's space and is due regardless of attendance.

Classroom	Weekly Tuition
Doves (Infants)	$230
Sparrows	$215
Roadrunners & Chickadees	$205
Blue Jays	$180
Falcons (After School Only)	$110
Falcons (Before & After School)	$145
Falcons Summer Program	$170

Payment Policy

• Tuition is billed every Friday for the upcoming week.

• Payment is due before the next week of care.

• If tuition has not been paid by Monday, your child may not attend until the account is brought current.

• Tuition is due regardless of illness, vacations, holidays, or absences unless otherwise stated in the Parent Handbook.

• Returned checks or declined electronic payments may be subject to additional fees.

Hours of Operation

Wonder Nest Academy is open Monday through Friday, 6:30 a.m.–6:30 p.m. Parents are expected to pick up their child by closing time. Late pickup fees may apply as outlined in the Parent Handbook.

Photo & Video Release

I give permission for Wonder Nest Academy to photograph and/or video my child during school activities. These photos or videos may be used for social media, the school website, printed materials, classroom displays, and marketing or promotional purposes. No names or personal identifying information will be published without additional permission.

Parent/Guardian Initials: _____

Splash Pad Permission

I give permission for my child to participate in supervised splash pad activities at Wonder Nest Academy. I understand that children will be supervised at all times, appropriate safety procedures will be followed, and I will provide appropriate swimwear, towels, and a change of clothing as requested.

Parent/Guardian Initials: _____

Bounce House Permission

I give permission for my child to participate in supervised bounce house activities provided by Wonder Nest Academy. I understand that staff will supervise all activities, safety rules will be enforced, and participation is voluntary and appropriate for my child's age.

Parent/Guardian Initials: _____

Parent Agreement

By signing below, I acknowledge that I have read and understand this Enrollment Agreement and agree to abide by the policies of Wonder Nest Academy. I understand that tuition is due each Friday for the following week and that failure to pay tuition when due may result in my child being unable to attend until the account is current. I understand that additional policies regarding illness, discipline, holidays, late pickup, medication, and other operating procedures are contained in the Wonder Nest Academy Parent Handbook.

Parent/Guardian Signature: _____

Printed Name: _____ Date: _____

Wonder Nest Academy Representative: _____

Printed Name: _____ Date: _____