

Flagstaff Christian Preschool



Registration Checklist

Child's Name _____

- Registration Form
- Immunization Waiver and Release Form
- Immunization Records
- Gymnastics Waiver
- Registration Fee \$125
- Last Month Tuition Payment
- Auto Pay Form (if applicable)

Registration is complete when all of the above have been submitted to the preschool office.

How did you hear about our preschool? _____

Flagstaff Christian Preschool

2019-2020 REGISTRATION FORM



Child's Name _____ Birthdate _____
 Home Address _____ Zip _____
 Parent's Names _____ Phone _____
 Email Address _____

Registration Fee: \$125 (Non-Refundable)

Monthly Rates with AutoPay Discount (Non-AutoPay add 5%)

<u>Full Day</u>			<u>Mornings Only</u>		
Five Days Per Week	\$645	6:30am—4:00pm	Five Morning Per Week	\$330	8:30am—noon
Four Days Per Week	\$557	6:30am—4:00pm	Four Mornings Per Week	\$304	8:30am—noon
Three Days Per Week	\$452	6:30am—4:00pm	Three Mornings Per Week	\$272	8:30am—noon
Two Days Per Week	\$310	6:30am—4:00pm	Two Mornings Per Week	\$205	8:30am—noon

Extended Care Available until 6:00pm add \$45 per month; 30% Discount Siblings

MONTHLY TUITION: _____

Circle Days and Times

Extended

<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>
AM PM Full	AM PM Full	AM PM Full	AM PM Full	AM PM Full

Tuition Policy: Your tuition is based on the 2019-2020 school year. It is broken down into 10 evenly monthly payments and is not adjusted or prorated for student absences or school closures, including short months, holidays, and snow days. Make-up days are NOT available. Schedule changes require a 30 day written notice. Tuition is due the first of each month.

No Refund Policy: The \$125 registration fee and Last Month's Deposit are non-refundable. The deposit will be applied to your May 2020 tuition or your last full month of tuition, provided a 30 day written notice is given to disenroll.

Withdraw Procedure: In the event you need to withdraw your child prior to May 29, 2020, you must complete a written withdraw form 30 days prior to leaving our program. Please note: You are responsible for payment for your student's classes whether or not your child attends class until 30 days after you notify the office in writing.

Responsible Person: As the parent/guardian of the above named child, I agree to accept full payment responsibility as indicated on this form. I further understand that no refunds will be given for any reason. If my account is referred for collection, I agree to pay attorney's fees, collection fees and all costs incurred. Any balance and owing after 30 days shall accrue interest at the rate of 18% per annum.

Parent/Guardian Name (Printed)

Signature

Date