



Office Use Only
 Registration Fee \$50 Sibling \$25
 Supply Fee \$30 Summer Activity Fee \$35
 Registration Date: _____
 Start Date: _____
 Payment Form: _____ By: _____

2020-2021 Registration and Payment Contract

Child's full name: _____ Date of birth: _____
 Parent/Guardian name: _____ Phone number: _____
 Parent/Guardian name: _____ Phone number: _____
 Mailing address: _____

Indicate Program Choice ✓	Programs	Hours	Weekly Tuition Rate	Special Rate/Program Director Approved
	Infants	7:00am-6:00pm	\$190.00	
	One year olds	7:00am-6:00pm	\$185.00	
	Two year olds	7:00am-6:00pm	\$180.00	
	Three year olds	7:00am-6:00pm	\$175.00	
	Four /Five year olds	7:00am-6:00pm	\$170.00	
	K-5 th (2 days/wk afterschool + 3 full days)	7:00am-6:00pm	\$135.00	
	K-5 th Full time (virtual learning)	7:00am-6:00pm	\$155.00	
	1 st -6 th summer care	7:00am-6:00pm	\$145.00	

(Full day tuition includes: AM & PM snack, lunch, enrichment activities (2 yrs and older)) (School age tuition includes: transportation, snack, enrichment activities)

A non-refundable registration fee and supply fee are required along with this registration form to reserve your child's position in your program of choice. All fees are due at the time of initial registration and on an annual basis in August. All fees are due prior to your child's first day of attendance. Payment policy is outlined in our family handbook. Tuition is due on Friday or Monday before 1pm to be considered on time; a late fee of \$10 /wk will be applied to accounts that are paid after 1pm on Mondays. A two (2) week paid notice is required for withdrawal and should be received along with a written notice of withdrawal. No refunds or credits are issued for days or weeks not attended for any reason. Sibling discounts are available for tuition and should be discussed with director at the time of registration.

I, (print name) _____, have read and understand the tuition and enrollment information provided above. By signing below, I agree to follow set policies for payment of weekly tuition, fees, late tuition fees, and any late pick-up fees (if applicable) for each child that I have enrolled at Preschool of the Arts.

Parent/Legal Guardian Signature: _____ Date: _____