**HOPE LUTHERAN PRESCHOOL**

**ADMISSION/FINANCIAL AGREEMENT**

**2025-2026**

**Dear Parents of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 \* I hereby agree to comply with the rules and regulations of Hope Lutheran Preschool regarding fees, attendance, health, parking, clothing, and other items specified in the Preschool Parent Handbook, issued by the preschool each year.

 \_\_\_\_\_\_I am aware of the school holidays.

 \* **A two-week written notice is required if the child is withdrawn at any time from**

 **the** **program. Tuition is due for this two-week period.**

* Tuition is due on the 15th day of each month. Beginning August 11, 2025 with the last payment due May 15, 2026.
* Tuition runs August 11 through May 15. There will be a late payment charge of $25.00 added to your balance if payment is not received by the 15th of the month. Also there is a $25.00 charge for any returned checks from the bank.
* The center reserves a space for each child and continues to pay operating expenses, therefore, **THERE IS NO CREDIT FOR VACATION, HOLIDAYS (they have been calculated into the tuition) AND SICK DAYS.**

**I agree to pay Hope Lutheran Preschool:**

**10 Payment(s) of $\_\_\_\_\_\_\_\_\_\_for the month(s) of August 11, 2025 - May 15, 2026**

**The above tuition schedule reflects your child’s enrollment for:**

**\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_ for \_\_\_\_ Full Time, \_\_\_\_ 3/4 Time, \_\_\_\_ 4hrs**

 **M-F M,W,F T, TH**

**I understand that my Parent Participation Requirement is 20 hours ($10/hour) for this school year, based on my child’s enrollment schedule.**

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 parent or legal guardian

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Director

**PLEASE SIGN AND RETURN WITH PAYMENT**

**Other Fees due at the time of Enrollment:**

Registration Fee $\_\_\_\_\_\_\_\_ Check payable to Hope Lutheran Preschool ck # **\_\_\_\_\_\_\_\_\_**

Earthquake Fee $\_\_\_\_\_\_\_\_ Check payable to Hope Lutheran ck # **\_\_\_\_\_\_\_\_\_**

**\*\*Fall Activity Fee $\_\_\_\_\_\_\_\_ Check payable to Hope Lutheran Preschool \*\* ck # \_\_\_\_\_\_\_\_**

**\*\*Nap Equip. Fee $\_\_\_\_\_\_\_\_ Check payable to Hope Lutheran Preschool \*\* ck # \_\_\_\_\_\_\_\_\_**

 **(\*\*Please write a separate check for the above 2 items)**

First Month’s Tuition $\_\_\_\_\_\_\_\_ Check payable to Hope Lutheran Preschool ck# \_\_\_\_\_\_\_\_

 **TOTAL DUE $ \_\_\_\_\_\_\_\_\_\_**