

Bucks Tuition Agreement 2017-2018

I. This agreement is by and between:

			and	Easter Seals				
Name of Parent(s) or Legal Guardian (please print)				2901 Edgley Levittown, PA				
Street Address/Box Numbe	r		_					
Town/City		Zip Code	_					
Start Date: End Date:								
	□ My child will	attend the 2018 §	Summer Session (July	//August)				
	My child will not attend the 2018 Summer Session (July/August)							
II. Child(ren) Enrolled:								
The parent(s)/guardian(s) a	gree to place the	e following child(re	en) in the Preschool F	Program and/or Lu	nch Bunch.			
Name (please print):								
Date of Birth:								
III. Enrollment Schedule								
The parent(s)/guardian(s) a for the above named child(r			eschool Program and	/or Lunch Bunch	will be available			
Preschool Class								
Check all that	D P.M. (12:3	M. (8:30 to 11:30 0 to 3:30 p.m.) 3:30 a.m. to 3:30	a.m.) p.m., Lunch Bunch In	cluded)				
	Monday	Tuesday	□ Wednesday	Thursday	Friday			
Lunch Bunch (11:30 a.m.	to 12:30 p.m.)							
Check all that apply:	Monday	Tuesday	Wednesday	Thursday	Friday			

□ Flex Option/\$7.50/day (24 hours notice required, child may attend if space is available)

Fees and Terms:

The parent(s)/guardian(s) and Easter Seals agree to the following fees (10% sibling discount available):

Please select desired schedule (*Lunch Bunch included):

CLASS

	5 Full Days/Week* \$678 per month	 4 Full Days/Week* \$544 per month 	 3 Full Days/Week* \$406 per month 	 2 Full Days/Week* \$272 per month 	
	5 Half Days/Week \$339 per month	 4 Half Days/Week \$272 per month 	 3 Half Days/Week \$203 per month 	 2 Half Days/Week \$136 per month 	 1 Half Day/Week \$67 per month
LU	INCH BUNCH				
	5 Days/Week \$113 per month	 4 Days/Week \$91 per month 	 3 Days/Week \$68 per month 	□ 2 Days/Week \$45 per month	□ 1 Day/Week \$22 per month

When the child is absent from the Preschool Program because of illness, vacation, or for any other reason, the parent agrees to pay Easter Seals for the days indicated in the enrollment schedule, and/or any additional programs registered for, provided Easter Seals services are offered during these periods. See the calendar for school closings (in the event of excessive closures due to inclement weather, make-up sessions will be offered).

Tuition will be billed in equal monthly installments. All fees will be billed monthly. Payments are due within 15 days of the invoice date. Non-compliance with this payment agreement will result in the application of a \$10.00 late fee on all payments received after the 15th day. A fee of \$25.00 will be charged for each check returned by the bank. Non-payment of fees may be cause for immediate termination without notice.

Please remit payment to:

Easter Seals of Southeastern Pennsylvania 2901 Edgely Road Levittown, PA 19057

This contract may be terminated at any time by written notice from either party. However, a written notice of at least one month would be greatly appreciated to allow the other party to make arrangements.

IV. Certification:

The parent(s)/guardian(s) agree, without reservation, to all terms and conditions of this agreement. I/We declare that the information appearing in this agreement is exact and complete.

A new agreement must be completed whenever there is a change in the number of children enrolled, number of days enrolled, type of service requested, fees, or other relevant policies.

Parent/Legal Guardian Signature

Easter Seals Division Director

Date



Date

