

Tuition Contract

Child's Name _____ Birthdate _____ Sex _____
Child's Name _____ Birthdate _____ Sex _____
Address _____
Father's Name _____ Employer _____ Phone _____
Mother's Name _____ Employer _____ Phone _____
Home Phone _____
Cell Phone(mom) _____ Cell Phone(dad) _____
Email _____

Please Circle:

1. Preschool/Pre Kindergarten- How many days per week? 2 3 4 5 Days: _____
Hours: Preschool 9-12 or 1:00-4:00 (7hrs) Arrival Time 9:00 Departure Time 4:00
Morning extended hour 8:00-9:00am
(Your child may only attend during his/her scheduled time, hours are not adjustable)

Preschool Tuition \$ _____ Extended Care \$ _____
Sibling Discount(10%, 2nd child) \$ _____

2. I undertake to pay monthly installments of \$ _____ **DUE ON THE 20th** of each month for the next calendar payment. If payment is made **after the 1st of the month, a late fee of \$5.00 per day** will be charged to the next months tuition payment. If payments are continuously late, this contract will be terminated.

3. I understand that a (NSF) returned check fee is \$25.00.

4. In case of withdrawal, I agree to notify Small Miracles Preschool in writing 30 days in advance and I am responsible for the tuition that month whether or not my child attends. **I also understand that no refunds, credits, or make up days are granted when my child is absent from preschool/childcare, holidays, and closed because of natural disasters, PG & E outages, and public health emergencies.** Vacation credit of (1 week) will apply if your child has been enrolled for 10 consecutive months.

5. The hourly fee of \$10.00 will be charged if your child is picked up after or dropped off before their scheduled time. Parents are expected to call the school if they will be late, however late fees will still be charged.

6. I understand that any additional drop in time will be charged at a rate of \$10.00 per hour. Rates are charged in hour increments only. **Any extra care must be cleared ahead of time by the director and is payable daily, or the charge is doubled.**

7. I understand the tuition is based on a yearly rate and pro-rated monthly for your convenience.

8. I understand that the annual registration fee of \$75.00 per family must be paid upon enrollment to the school and again in August during re-registration period. Annually, new tuition rates will be posted at least 2 months prior to change. Any child enrolling between May 1st and July 31st will not pay the re-registration fee until august. Registration fees are not refundable.

9. **We are closed for the following holidays:** Labor Day, Thanksgiving and the Friday after, December 24th-January 1st, Martin Luther King Jr. Day, President's Day, Good Friday and the week following Easter, Memorial Day, July 4th, and two teacher work days to be scheduled.

10. There will be a \$5.00 late fee for children picked up after 4:05pm and \$5.00 for every minutes after that until the child is picked up. After 4:15pm children may be taken to an emergency caregiver and notification of address will be posted on the door. Parents are expected to call the school if they will be late, however, late fees will still be charged.

My signature affirms that I have read, understand, and accept the terms and conditions of this contract.

Signature _____ Date _____