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| **TUITION CONTRACT for 2024-2025 School Year**   |  |  | | --- | --- | | |  | | --- | | Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Please list each student enrolling in the Child Development Center program:**  Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tuition/Schedule selected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tuition/Schedule selected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |   **Required Fees: All fees are per student.**   * New to WKCDC Student application fee *(non-refundable)*  $100.00 * Annual Registration fee *(non-refundable)*  $250.00 * Snack Fee $180.00 |  |  | | --- | | **Annual Tuition: Preschool - Pre-K Program**  5 day per week program: Monday through Friday Annual Per Month Initial  8:00 am – 12:15 pm **available if space permits** $6,460 $646 \_\_\_\_\_\_  8:00 am – 4:30 pm (**Friday early release at 3:00)**  $11,130 $1,113 \_\_\_\_\_\_  4 day per week program: Monday through Thursday only *(no day exchanges allowed)*  8:00 am – 12:15 pm  **available if space permits** $5,900 $590 \_\_\_\_\_\_    8:00 am – 4:30 pm $9,580 $958 \_\_\_\_\_\_  **Annual Tuition: Toddler 2’s program:**    5 day per week program: Monday through Friday  8:00 am - 4:30 pm **(Friday early release @ 3:00)**  $15,220 $1,522 \_\_\_\_\_\_  4 day per week program: Monday through Thursday  8:00 am –4:30 pm $12,890 $1,289 \_\_\_\_\_\_ | | **A 10% discount on tuition applied for multiple children enrolled.**  **A 10% discount on tuition applied for active military families.** |   **Initial:\_\_\_\_\_\_\_\_\_\_** |

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| **TUITION CONTRACT Continued**   |  | | --- | | **General Tuition information:**  Tuition is based on the annual school calendar. WKCDC offers monthly payment plans. Please note, debit or credit card payments will incur a $20/per transaction fee for online processing.  Statements are mailed or e-mailed to parents before the 1st of the month. Payments are **due by the 10th** of each month, a **late fee of $35** will be assessed if the monthly payment is not received by then. If payment isn’t received by the 15th of the month, a notice will be sent. The student(s) *will not* be allowed to return to school after the 1st day of the next month until the account is paid in full, unless arrangements are made.  **Billing Options:**   * 10 Monthly payments: August 2024 through May 2025 * Payment in full: If paid on or before June 1, 2024, a 2% discount will be applied. Discounts are offered for payments made with cash or check only. |  |  | | --- | | **Withdrawal Information and Refund Policy:**   * Once the enrollment process is complete (forms and fees submitted, evaluation and interview complete) a written notice is required 30 days in advance of intention to withdraw a child from school. If 30 days’ notice is not given, the responsible party will be charged for all school days within thirty days following the date of the child’s withdrawal regardless of attendance on those days. * All fees are non-refundable. Tuition is pro-rated on a daily basis in accordance to the signed tuition contract. * There will be no tuition deductions or allowances made for those days on which the school is closed due to holidays, vacations, teacher workdays, or closure due to weather conditions. No deduction or allowances will be made for absences from school except in the case of severe illness or hospitalization, subject to Preschool Director approval. | | |
| **Tuition Payment Calculation – to be filled out with the Preschool Director.**  Total annual tuition (from front page) $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Payment in full (cash or check only) by 06/01/2024, 2% discount amount $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Additional discount (Business Administrator approval for staff & minister) $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Final annual tuition calculation**: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Monthly payment amount 10-month plan: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **TUITION CONTRACT Continued**   |  | | --- | | **Parent Pledge:**  I have carefully read the rules for enrollment and withdrawal and agree to comply with all terms and regulations expressed in the Willamette Kids Child Development Center Parent & Student Handbook. I also agree to be bound by the school to pay all tuition and fees required in accordance with the financial policies of the school. Accounts which become delinquent after several attempts at communication are subject to collections.  I understand that each monthly installment is due in full on the 10th day of each month and any remaining balance is subject to a $35 late fee. WKCDC policy states that accounts which have become 30 days past due shall result in the student(s)’ dismissal. I understand that I will be assessed a fee of $35.00 for any personal checks issued by me which are returned from the bank for insufficient funds. I also understand that if any two (2) of my personal checks are returned due to insufficient funds I will be required to make all future payments with cash, cashier’s check or certified funds.  ***NOTE: Both parents/guardians must sign this agreement if both are listed as “financially responsible” on the registration form. If someone other than a parent/guardian is paying the tuition, their signature and information is required. Please provide the individual’s address and contact information to the Preschool Director.***  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_**  Parent/Guardian Signature Print Name Legibly Social Security No. Driver’s License No. Date  (required, kept confidential) (required)  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_**  Parent/Guardian Signature Print Name Legibly Social Security No. Driver’s License No. Date  (required, kept confidential) (required) |  |  | | --- | | **Office Use Only:** Entered into tracking program? Yes No Entered into Financial Software? Yes No | |