Springfield Christian Kindergarten and Preschool Phone: 541-746-8246

2080 19th Street, Springfield, OR 97477

Tuition Contract 2017-2018

Please print the following

| Child's Full Name | | | | | |
|--|--|--|--|---|--|
| Parents Names | | Contact Email Contact Email | | | |
| | | | | | |
| FULL tuition is prorated a <i>Tuition is due on the first da</i> 10th. Tuition payments ma | y of the month. | A \$10.00 late fe | e will be incurred for p | | |
| Preschool Fees: \$ | es: \$ \$150.00 Non-refundable registration and activity fee. | | | Initial: | |
| Kindergarten Fees: \$ | \$225.00 Non-refundable registration, activity & curriculum fee | | | m fee. Initial: | |
| | Tuition S | chedule for ho | urs 9:00-11:30 | | |
| | | Please check desir | ed class | | |
| Class | Days | Annual Annual | Monthly Payment (Au | <u>g-April)</u> | |
| 2-day 3' | | \$ 900.00 | \$100.00 | | |
| 3-day 3' | | \$ 1215.00 | \$135.00 | | |
| 2-day 4' 3-day 4' | | \$ 990.00 \$ 1,305.00 | \$110.00 \$145.00 | | |
| 5-day 4 [°] | | \$ 1,800.00 | \$200.00 | | |
| 5-day K | | \$ 1,800.00 | \$200.00 \$215.00 | | |
| Tuition Payments *TUITION PAYMENTS are April. Tuition is prorated, yo advance. First payment in A | due on the 1st day ur child(ren) will | y of each month, attend from Sept | for nine months beginni ember thru May. Tuition | | |
| I have carefully read the guide by the school to pay all tuition due by the <u>first day of the mo</u> states that an account which have are made with the office. A \$2 or reminders for tuition pay understand that if I pick my ch 15 minutes I am late. I under sickness, vacation schedule of the monthly tuition is current, said c | and fees required onth and any remand as become thirty do so that and any remands of the second control of the second and sign be the second and | in accordance within accordance within accordance is stays past due shall be assigned for all equest a receipt, in 1:45 AM there is allow that I am resunderstood that if my | th the financial policy of abject to a late fee of \$10 result in the student's distributed checks. The school check will be consider a \$5.00 late pick up fee a sponsible for the full year child is withdrawn from the school check with the scho | the school. My payment is on the 11th. School polices missal unless arrangements thool does not send invoice and my receipt. I also added to my account for each arly tuition regardless of | |
| Parent/Guardian Signature (person assuming responsibility for tuition paymen | | | Social Security # | Date required | |
| Parent/Guardian Signature (person assuming responsibility for tuition payment) | | | Social Security # | Date required | |
| | • | | e tuition contract for yours child dropping during th | • | |