Harrison Preschool – Enrollment Contract – 2024/2025

Please initial all yellow areas and sign on the back

Fees

1. The registration fee is due at the time of registration and must accompany the completed registration form and signed Enrollment Contract.
2. All fees are non-refundable.

Payment of Fees

1. One month’s tuition is due when you accept a spot. This advance tuition payment will be credited for the month of May 2025 and is also non-refundable.
2. The remaining 8 monthly tuition payments are due on the first day of each month, beginning with September 1st, unless you chose to pay semi-annually or annually or other arrangements are made with the Preschool Director. A fee of $15.00 is charged for payment received after the 10th of the month.

 Withdrawal

 The Preschool Director must be notified in writing one month in advance of withdrawal of a

 child. If you withdraw from the preschool and do not fulfill your financial commitment to

 the current school year then you will not be eligible to register for the next school year.

 If your child is absent for an extended period tuition must be paid in advance in

 order to hold your child’s spot in the classroom.

 Health Policy

 All children must submit an up-to-date Immunization Record prior to the start of school.

 No child will be accepted without immunizations.

 Limitation of Liability

 Neither Harrison Church nor Harrison Preschool shall have any liability or responsibility

 for any injury suffered by any child before, during or after participation in Harrison

 Preschool.

 Parents’ Agreement: I/We will…

 \_\_\_\_\_ Discuss with the Director prior to enrollment any special needs or problems of

 our child (physical, mental, emotional, etc.), and agree to abide by all inclusion

 policies.

 \_\_\_\_\_\_ Submit up-to-date immunizations prior to the start of school.

 \_\_\_\_\_\_ Keep our child at home if displaying illness or cold symptoms that are listed in the

 Parent Handbook found on our website <http://harrisonchurch.org/connect/preschool>

 \_\_\_\_\_\_ Report immediately the development of any contagious disease.

 \_\_\_\_\_\_ Report in writing any allergies of the child.

 \_\_\_\_\_\_ Be bound by all policies regarding registration, fees and withdrawal.

**Payment Options**

|  |  |  |
| --- | --- | --- |
| **Select one** | **Payment Frequency** | **Payment Schedule** |
|  | Monthly | 1st – 10th of Sept, Oct, Nov, Dec, Jan, Feb, Mar & Apr. |
|  | Semi-Annual | 1st – 10th of Sept for Sept – Dec, & 1st – 10th of Jan for Jan-Apr. |
|  | Annual | 1st – 10th of Sept |

|  |  |  |  |
| --- | --- | --- | --- |
| 2024-2025 | Monthly | Semi-Annual | Annual |
| Ones (2 days) | $250 | $1000 | $2000 |
| Ones (3 days) | $315 | $1260 | $2520 |
| Twos (2 days) | $235 | $940 | $1880 |
| Twos (3 days) | $300 | $1200 | $2400 |
| Threes (2 days) | $235 | $940 | $1880 |
| Threes (3 days) | $300 | $1200 | $2400 |
| Fours (4 days) | $330 | $1320 | $2640 |
| Fours (5 days) | $370 | $1480 | $2960 |

Parents Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_