

MAIN STREET preschool

Financial Agreement

Student Name: _____ DOB: _____

I understand the following:

_____ -A non-refundable registration fee of \$30.00 is due at the time of registration in order to secure my child's place within the program.

_____ -The weekly rate for the program is \$80.00 and payments can be made weekly or monthly.

_____ -Payments are due the Friday prior to the start of the week or the Friday prior to the first in session day of the month.

_____ -I will be charged a \$15.00 late fee for payments made after the Friday prior to the start of the week or the Friday prior to the first in session day of the month.

_____ - Pick-up is at Noon and if my child is not picked up by 12:15pm, I will be charged a \$10.00 fee. For every 15 minutes after 12:15pm that my child remains at the program, I will be charged another \$10.00. The late charges must be paid before my child is able to return to the next program session.

_____ -Payments will ONLY be accepted through Main Street Preschools website (www.morelifechurch.com/preschool).

_____ -Personal check and cash are NOT accepted as forms of payment.

_____ -Refunds will not be given for sick, absent, or inclement weather days.

_____ -My family will receive one (1) week of vacation per program year (Sept.-May) and no tuition will be due for that week.

❖ _____ - Time off must be submitted in writing prior to the start date of the vacation.

❖ _____ - The vacation days must be consecutive.

_____ -All payments are non-refundable (except for tuition paid more than one month in advance).

_____ -The program does not currently accept publicly funded childcare.

_____-The program will be closed for the observed holidays listed and that I will not be charged for them:

- ❖ Labor Day
- ❖ Thanksgiving Break
- ❖ Christmas Break
- ❖ New Year's Day
- ❖ Martin Luther King Jr. Day
- ❖ Presidents Day
- ❖ Spring Break
- ❖ Memorial Day

I agree to pay tuition in accordance with Main Street Preschools financial agreement.

Parent/Legal Guardian Signature: _____

Parent/Legal Guardian Printed Name: _____

Date: _____