

Sprout House, Inc.
A New Jersey Non-Profit Corporation
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Monthly Contract Change Form to Add Aftercare 4-5 p.m.

Name: _____

Date: _____

Program: _____

Effective date of change: _____

Original Schedule:

New Schedule:

Monday _____

Monday _____

Tuesday _____

Tuesday _____

Wednesday _____

Wednesday _____

Thursday _____

Thursday _____

Friday _____

Friday _____

Original Monthly Tuition: _____

Add Aftercare: 4-5 p.m. Circle Days: M, T, W, Th, F

Monthly Fee if 5 days per week is \$300

Monthly Fee if 4 days per week is \$240

Monthly Fee if 3 days per week is \$180

Monthly Fee if 2 days per week is \$120

Monthly Fee if 1 day per week is \$ 60

Monthly 4-5 p.m. Aftercare Tuition: _____

Bi-Monthly Aftercare Tuition: _____

New Total Monthly Tuition: _____

New Total Bi-Monthly Tuition: _____

Comments: _____

Parent Signature: _____

Date: _____

Administrator Signature: _____

Date: _____

8-22-22

Update: Quickbooks
Family schedule
Classroom charts