Sprout House, Inc.

A New Jersey Non-Profit Corporation 200 Main Street Chatham, New Jersey 07928 (973) 635-9658

KINDERGARTEN

REGISTRATION 2024-2025 September – June

Child's Name:						_F:
Parent's Name:			_ Parent's Name:			
Address:			City:		_State:_	Zip:
Email Address: _			Email Address: _			
Cell Phone:			Cell Phone:			
Kindergarten ho You may be billed s Please select any ex	eparately for fees	in connection wi		ion is \$1,13	35 per r	nonth
Extended Hours Options	Monthly Fee for 1 day per week:	Monthly Fee for 5 days per week:	Please check days i	needed:		
Before School 7:30AM – 8:30AM	\$63	\$273	□Mon □Tue □	lWed □Thu	□Fri	
Extended Hours 2:45PM – 4:00 PM	\$77	\$335	□Mon □Tue □	lWed □Thu	□Fri	
Aftercare 4:00PM – 5:00 PM	\$63	\$273	□Mon □Tue □	lWed □Thu	□Fri	
Due at Registration: Registration Fee: First Two Months Tui First Two Months Tui *Total Due:				ndable)		
*Total Due Each 2 M (Nov/Dec, Jan/Feb, M		\$				

Other Fees: Late pick-up.....\$20.00 each hour or part of hour

^{*}The tuition deposited at registration and the tuition billed each two months are **nonrefundable** unless we can fill the class from our waiting list. A \$75 administration fee will be applied to all qualifying refunds.

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TUITION CONTRACT – Term: September 2024 – June 2025

Child's Name	Bi-Monthly Payment				
Bi-Monthly Payment I understand that the total bi-monthly payment per child is listed above, and it is non-refundable if I voluntarily withdraw my child. After the October/September deposit is paid, the remaining tuition is billed in four bi-monthly payments on November 1, January 1, March 1 and May 1. I agree to pay the bi-monthly payment on or before the FIRST OF THE MONTH. This is essential to the school's budget. A late fee of \$20.00 will be charged if payment is received after the 1st of the month.					
If fees are not paid by the 1st of the month, Sprout House r	reserves the right to restrict the student's attendance until the outstanding fees are paid.				
I understand that there will be no refunds for any absences.	, scheduled school closings, unscheduled emergency closings or any vacations.				
I understand that the cost of programs may change due to c	changes in costs beyond the school's control.				
I understand that my bi-monthly payment will cover only s	specific days and hours contracted.				
I understand that receipt by the school of the first two months of tuition secures my child's class placement. <i>The tuition deposited at registration and the tuition billed each two months are nonrefundable, unless the student's placement is filled from the waiting list.</i> A \$75 administration fee will be deducted from all qualifying refunds.					
I understand that enrollment is on a first come, first served	basis and enrollment is limited.				
Additional Fees I agree to pay a non-refundable registration fee each time for the summer.	my child is newly enrolled. This includes a child who must be enrolled after withdrawing				
I understand that if I fail to pick up my child at the pre-arranged time there will be a \$20.00 late fee, in addition to the normal extended time rate per child.					
I agree to pay a \$35.00 returned check fee.					
Child-School Dynamics I understand that my child's photo may be used for education. In order to ensure a releval extress free extremely have force.					
for the rights and needs of others and to conform to all	all, children and parents are expected to behave in ways that demonstrate consideration rules and regulations. I understand that failure to meet these expectations will lead to ossible behavioral concerns be discussed prior to enrollment.				
	of behavior that is harmful to others or him/herself. The school reserves the right to tion will be forwarded within 60 days. In some cases, a full developmental evaluation				
In lieu of developmental screenings, and in any case wh which case a refund of unused tuition will be forwarded	nen the school deems it necessary, the school reserves the right to terminate service, in d within $60~\mathrm{days}$.				
I understand that Staff exercises the utmost caution and Staff Members and Board Members harmless in all situ	d care regarding the safety of the children. I will save and hold the Sprout House nations.				
The above terms are understood and agreed to, and I am enrolling my child pursuant to this agreement.					

Director's signature

Date

Date

Parent's signature