



**The Church In The Highlands Early Childhood Center
2021-2022 Tuition Schedule & Agreement**

- ❖ EARLY BIRD CREDIT \$100 credit applied if full tuition is paid by April 1st, 2021
- ❖ MULTI-STUDENT DISCOUNT 5% off combined tuitions not including additional services

Full Day Payment Schedule

	<u>5 Days</u>
Annual Tuition	\$11,250
Less Deposit	-\$500
Tuition Balance	\$10,750
Plan A - Quarterly *\$40 fee <u>5 Days</u>	
Due by the 1 st of the month April, June, August, October	\$2,697.50
Plan B - Monthly *\$90 fee \$1,204.45	
Due by the 1 st of the month April 2021 - December 2021	
5 Days with 5 Enrichments	\$12,875.00
5 Days with 4 Enrichments	\$12,575.00

Half Day Payment Schedule

	<u>2 Days</u>	<u>3 Days</u>	<u>5 Days</u>
Annual Tuition	\$3,600	\$4,700	\$6,500
Less Deposit	-\$500	-\$500	-\$500
Tuition Balance	\$3,100	\$4,200	\$6,000
Plan A -Quarterly*\$40 fee <u>2 Days</u> <u>3 Days</u> <u>5 Days</u>			
Due by the 1 st of the month April, June, August, October	\$785.00	\$1,060	\$1,510
Plan B - Monthly *\$90 fee <u>2 Days</u> <u>3 Days</u> <u>5 Days</u>			
Due by the 1 st of the month April 2021-December 2021	\$354.44	\$476.67	\$676.67

Note: If you choose additional services or enrichment classes they will be added to your chosen payment plan below.

Choose a Payment Plan *Note: *a service fee of \$10.00 was included per payment if plan A or B was chosen.*

- Pay in Full
 Plan A Quarterly 4 Payments
 Plan B Monthly 9 Payments

2021-2022 Tuition Agreement

Please initial on the line next to each statement

I understand that the \$500 deposit and my first two monthly tuition payments (April & May) are also non-refundable if I decide to withdraw my child from the program for any reason. _____

I understand that if I do choose to withdraw my child, I may not be entitled to a refund of my remaining tuition paid (beyond first 2 months payments) unless my child's spot is filled. _____

I am aware that I must notify the school 30 days in advance, in writing if I chose to withdraw my child from the program, and will be responsible for payment of those 30 days. _____

I agree to make all payments for tuition, enrichment, and any other service selected on the indicated due dates of my chosen payment schedule. _____

I understand that I may not reduce my child's days, hours or services after October 15th. _____

In signing below, I agree to abide by all financial and school policies in this agreement

Childs Name: _____ DOB: _____ Address _____

Parent/Guardian Name: (please print) _____

Parent/Guardian Signature: _____ Date: _____