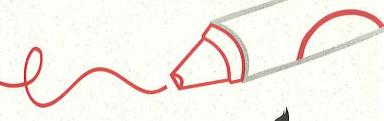
## **AGREEMENT**

55 PA CODE CHAPTERS 3270.123 &.181(C); 3280.123 &.181(c); 3290.123 &.181(c)

Services to be provided as part of the day care fee (examples; transportation, care, meals, etc.)  CHILD'S ARRIVAL TIME	NAME OF CHILD				
CHILD'S ARRIVAL TIME CHILD'S DEPARTURE TIME. PERSONS DESIGNATED BY PARENT TO WHOM CHILD MAY BE RELEASED  LATE FEE PER MIN-HR  SEXTra services to be provided at an additional fee if applicable  I, the parent/guardian;  received complete written program information at the time of enrollment. (§ 3270.121,  3280.121, 3290.121)  agree to update the emergency contact/parental consent form information whenever changes occur or every 6 months at a minumum. (§ 3270.124, 3280.124, 3290.124)  SIGNATURE-OPERATOR DATE SIGNATURE-PARENT OR GUARDIAN DATE  DATE OF CHILD'S ADMISSION  PERIODIC REVIEW  SIGNATURE-PARENT OR GUARDIAN DATE	FEE AMOUNT	PER-DAY-WEEK	7787 - VIII-04 K	DAY PAYMENT TO BE MADE	20-02-19-1
Extra services to be provided at an additional fee if applicable    I, the parent/guardian;   received complete written program information at the time of enrollment. (§ 3270.121, 3280.121, 3290.121)   agree to update the emergency contact/parental consent form information whenever changes occur or every 6 months at a minumum. (§ 3270.124, 3280.124, 3290.124)	Services to be provided as	s part of the day o	are fee (exa	nples; transportation, care, meals, etc.)	
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Extra services to be provided at an additional fee if applicable					11
\$ Extra services to be provided at an additional fee if applicable	CHILD'S ARRIVAL TIME		TIME	PERSON(S) DESIGNATED BY PARENT TO WHOM	CHILD MAY BE RELEASED
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SIGNATURE-OPERATOR DATE SIGNATURE-PARENT OR GUARDIAN DATE  DATE OF CHILD'S ADMISSION  DATE OF WITHDRAWAL  SIGNATURE-PARENT OR GUARDIAN  DATE	received com 3280.121, 32	plete written pro 290.121)	ogram infor	mation at the time of enrollment. (	\$ 3270.121,
DATE OF CHILD'S ADMISSION  PERIODIC REVIEW  DATE OF WITHDRAWAL  SIGNATURE-PARENT OR GUARDIAN  DATE	agree to update changes occur	ate the emergend or every 6 mo	cy contact/ponths at a r	parental consent form information minumum. (§ 3270.124, 3280.124,	whenever 3290.124)
DATE OF CHILD'S ADMISSION  PERIODIC REVIEW  DATE OF WITHDRAWAL  SIGNATURE-PARENT OR GUARDIAN  DATE	s: ā				
DATE OF CHILD'S ADMISSION  PERIODIC REVIEW  DATE OF WITHDRAWAL  SIGNATURE-PARENT OR GUARDIAN  DATE					
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DATE OF WITHDRAWAL  SIGNATURE-PARENT OR GUARDIAN DATE	SIGNATURE	-OPERATOR	DATE	SIGNATURE-PARENT OR GUARDIAN	DATE
SIGNATURE-PARENT OR GUARDIAN DATE	DATE OF CHILD'S ADMISSION			PERIODIC REVIEW	
	DATE OF WITHDRAWAL			4 70	
	03892A			SIGNATURE-PARENT OR GUARDIAN	DATE CY 321 - 12/99

## The Children's School at Saint John's





## TUITION AGREEMENT 2014/2015

The tuition payment schedule for 2014/2015 is below. The below schedule is devised to guide you in planning your budget. Tuition is due on the Monday of each week (or first day of attendance for part-time children). Please remember that tuition will be charged even if your child is absent from school.

No child will be admitted to school if a balance is more than two (2) weeks past due. Once the balance is paid in full the child(ren) may return to school if the vacancy has not been filled.

If tuition payments are not paid in full by the first Friday of the month, a \$25.00 Late Fee will be charged for each enrolled child.

Weekly Tuition for	is \$
Enrollment Fee for	is \$

## **TUITION SCHEDULE**

DUE DATE	AMOUNT
July 7, 2014	4 X Weekly Tuition
August 4, 2014	4 X Weekly Tuition
September 1, 2014	5 X Weekly Tuition
October 6, 2014	4 X Weekly Tuition
November 4, 2014	4 X Weekly Tuition
December 1, 2014	4 X Weekly Tuition
	(No charge 12/29-1/2)
January 5, 2015	4 X Weekly Tuition
February 2, 2015	4 X Weekly Tuition
March2, 2015	5 X Weekly Tuition
April 6, 2015	4 X Weekly Tuition
May 4, 2015	4 X Weekly Tuition
June 1, 2015	5 X Weekly Tuition

<sup>\*</sup>Each child is entitled to one (1) additional week vacation period each year (September to July). There will be no charge for this week. Please make the necessary adjustment for the vacation week when paying for the involved month.

Please sign and return it to The Children's School at Saint John's.

Signature:				Date:			
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404 Levering Mill I	Road • Bala Cynv	yd • Pa. • 19004	1 • tel. (610) 66	4-4588 • e-m	nail: the.childrenss	chool@verizon.n	et 🍕

