



Edge Park United Methodist Preschool

Preschool Contract

Name of Child _____ Date of Birth: _____

Name of Parent: _____

My child is enrolling for MWF (\$350/month) or M-F (\$450/month)

Please check or initial each item – Do not leave any blanks on this form

____ I will pay Monthly Tuition of \$_____. Payment is due the first FIVE days of each month. Tuition is based on a 9 month average and is not adjusted for school closings, illness or personal vacations.

____ I will provide my child a daily lunch and beverage (no sodas) and am solely responsible for the nutritional value of the food I am providing for my child. Edge Park Preschool is not responsible for nutritional content. Do not send red juice, red jello, or shredded cheese (this includes pizza lunchables) due to stains/mess.

____ Tuition paid after the first five days of every month is considered late, a penalty of \$25 for each week I am late will be charged to me. My child may be subject to withdrawal from Edge Park Preschool and cannot return to preschool until tuition and late fees are current.

____ I understand that **nonrefundable** supply fees are paid at the beginning of each semester. The 1st supply fee is due in September and the 2nd supply fee is due in January. MWF: \$75/semester M-F: \$100/semester

____ **Preschool begins promptly at 9:00 am. The door will be open from 9:00-9:10 each morning.** Children must be in the building with all items needed for the day before 9:10. **No arrival after 9:10.**

____ Children will be ready for dismissal at 2:15 M-Th/12:15 Fri. Pick-up after 2:30/12:30 will result in a penalty fee of \$10 + \$1 per minute late picking up paid in cash immediately.

____ I understand that children in the three year old and Pre-K classes **must** be fully potty-trained, which means my child has independent bathroom skills and is no longer in a pull-up.

____ To withdraw my child from preschool, I will give the preschool one month's advance notice and pay tuition to the end of noted month. Once withdrawn, my child's spot is not guaranteed to still be open. To re-enroll, registration fee must be paid again. Our teacher's hours are based on enrollment, please do not drop without notice.

____ I understand that sick children are not allowed to attend preschool, including those with fever or stomach problems in the previous 48 hours, contagious disease, rash, or any illness that prevents my child from enjoying regular preschool activities. In some instances, a doctor's note may be required to return to preschool. If my child gets sick while at school, I need to pick him/her up as quickly as possible.

____ I understand that incomplete admission records will keep my child from attending regular preschool classes at Edge Park Preschool. Edge Park Preschool reserves the right to withdraw my child from preschool without current and complete admission records. I am responsible for updating all forms as necessary, including phone number, address, shot records, statement of health, and any other information that may concern my child.

____ I understand that it is important for anyone dropping off/picking up my child (including those listed on my emergency contact list) know and understand our policies, including late arrival, late pick-up, and illnesses.

Parent Signature _____ Date _____

Director Signature _____ Date _____