



4936 Old Irwin Simpson Road
Mason, Ohio 45040 • 513-398-6928

Early Childhood Program Enrollment Agreement
(Newly Enrolled Student)
School Year 2010/11
Full Day Programs

Child's Full Name	(Nickname)	Date of Birth	Gender
Home Address / Street	City	State	Zip
Home Telephone	Home e-mail address		

Tuition Payments:

By signing this Agreement, I request that the School reserve a place for my child in the program(s) noted reverse. Upon acceptance of the Enrollment Agreement by The Child's Place Montessori School, Inc., I understand that my obligation to pay the tuition and fees for all programs noted above is unconditional and that no portion of fees paid or outstanding will be refunded or canceled in the event of absence, illness, failure to attend. Withdrawal from the School requires a two week written notice or enrollment deposit will be forfeited.

I understand that before acceptance by the School, I must submit the completed Application together with a non-refundable Application Fee in the amount of \$50.00. Within one calendar week of contact by the School regarding my child's acceptance, I will submit this completed Enrollment Agreement together with an Enrollment Deposit in the amount of two weeks tuition (amounts listed on reverse side) to secure my child's space. Failure to meet this deadline could result in my forfeiting the space. This Deposit applies toward the tuition for the final 2 weeks of enrollment provided proper notice of withdrawal is given as stated above. Payments are expected follows:

- **Tuition is due on a weekly basis. Payment for the week is due on Monday of that week. There will be a \$10 late fee if payment is received after Wednesday. Non-payment for two weeks will result in automatic expulsion and forfeiture of enrollment deposit. Automatic payment transfer from your checking or savings account is available.**

Policies: I understand that the School must comply with Regulations set forth by the State of Ohio, Ohio Department of Education. I understand that I must fully comply by completing all required forms with respect to these Laws and that the School reserves the right to exclude my child from its Programs if I do not do so. Such exclusion does not negate my financial obligations under this Enrollment Agreement.

Withdrawal: A two week written notice is required for withdrawal from the Early Childhood Program. If a two week written notice is given, your deposit will be applied to your last two weeks in our program. If no notice, or less than two weeks notice, is given, the deposit will be forfeited. The Child's Place shall have the right to legal action for collection of School tuition and fees and parents will be responsible for all costs of collection, including court expenses and reasonable attorney's fees.

Cancellation and Waiver: I understand that the School reserves the right to cancel this Agreement if the School determines that my child should not continue as a student for any reason.

Agreement: The persons signing below agree to all the terms and financial obligations set forth in this Enrollment Agreement and the accompanying Early Childhood Program Application.

Signature of Father or Guardian

Date

Signature of Mother or Guardian

Date

ACCEPTED BY THE SCHOOL:

Director

Date

The Childs Place recruits and admits students of any race, color or ethnic origin to all its rights, privileges, programs and activities. In addition the School will not discriminate on the basis of race, color or ethnic origin in the administration of its educational programs and athletics/extracurricular activities. Furthermore, the school is not intended to be an alternative to court or administrative agency ordered, or public school district initiated desegregation.

THE CHILD'S PLACE ENROLLMENT OPTIONS AND FEES

FULL DAY – 5 days/wk:

<u>Time</u>	<u>Infants</u> (6 wks – 18 mos.)		<u>Toddlers</u> (19-29 mos.)		<u>Transitional Preschool</u> (start at 30 mos.)	
	<input type="checkbox"/>	<u>\$/wk</u>	<input type="checkbox"/>	<u>\$/wk</u>	<input type="checkbox"/>	<u>\$/wk</u>
7 am – 6:30 pm	<input type="checkbox"/>	294	<input type="checkbox"/>	284	<input type="checkbox"/>	273
7 am – 5:30 pm	<input type="checkbox"/>	265	<input type="checkbox"/>	255	<input type="checkbox"/>	245
7 am – 4:30 pm	<input type="checkbox"/>	235	<input type="checkbox"/>	225	<input type="checkbox"/>	220
8 am – 6:30 pm	<input type="checkbox"/>	265	<input type="checkbox"/>	255	<input type="checkbox"/>	245
8 am – 5:30 pm	<input type="checkbox"/>	235	<input type="checkbox"/>	225	<input type="checkbox"/>	220
8 am – 4:30 pm	<input type="checkbox"/>	205	<input type="checkbox"/>	200	<input type="checkbox"/>	190

FULL DAY – PARTIAL WEEK*:

<u>3 days (MTW)</u>		<u>Infants</u> (6 wks – 18 mos.)		<u>Toddlers</u> (19-29 mos.)		<u>Transitional Preschool</u> (start at 30 mos.)	
<u>Time</u>	<input type="checkbox"/>	<u>\$/wk</u>	<input type="checkbox"/>	<u>\$/wk</u>	<input type="checkbox"/>	<u>\$/wk</u>	<u>\$/wk</u>
7 am – 6:30 pm	<input type="checkbox"/>	221	<input type="checkbox"/>	215	<input type="checkbox"/>	205	
7 am – 5:30 pm	<input type="checkbox"/>	200	<input type="checkbox"/>	194	<input type="checkbox"/>	185	
7 am – 4:30 pm	<input type="checkbox"/>	180	<input type="checkbox"/>	175	<input type="checkbox"/>	167	
8 am – 6:30 pm	<input type="checkbox"/>	200	<input type="checkbox"/>	194	<input type="checkbox"/>	185	
8 am – 5:30 pm	<input type="checkbox"/>	180	<input type="checkbox"/>	175	<input type="checkbox"/>	167	
8 am – 4:30 pm	<input type="checkbox"/>	161	<input type="checkbox"/>	158	<input type="checkbox"/>	150	

<u>2 days (ThF)</u>		<u>Infants</u> (6 wks – 18 mos.)		<u>Toddlers</u> (19-29 mos.)		<u>Transitional Preschool</u> (start at 30 mos.)	
<u>Time</u>	<input type="checkbox"/>	<u>\$/wk</u>	<input type="checkbox"/>	<u>\$/wk</u>	<input type="checkbox"/>	<u>\$/wk</u>	<u>\$/wk</u>
7 am – 6:30 pm	<input type="checkbox"/>	163	<input type="checkbox"/>	158	<input type="checkbox"/>	150	
7 am – 5:30 pm	<input type="checkbox"/>	147	<input type="checkbox"/>	142	<input type="checkbox"/>	135	
7 am – 4:30 pm	<input type="checkbox"/>	133	<input type="checkbox"/>	128	<input type="checkbox"/>	122	
8 am – 6:30 pm	<input type="checkbox"/>	147	<input type="checkbox"/>	142	<input type="checkbox"/>	135	
8 am – 5:30 pm	<input type="checkbox"/>	133	<input type="checkbox"/>	128	<input type="checkbox"/>	122	
8 am – 4:30 pm	<input type="checkbox"/>	120	<input type="checkbox"/>	115	<input type="checkbox"/>	110	

DESIGN YOUR OWN WEEK*:

3 days (Circle – M T W Th F) Infants only
(6 wks – 18 mos.)

<u>Time</u>	<input type="checkbox"/>	<u>\$/wk</u>
7 am – 6:30 pm	<input type="checkbox"/>	237
7 am – 5:30 pm	<input type="checkbox"/>	213
7 am – 4:30 pm	<input type="checkbox"/>	192
8 am – 6:30 pm	<input type="checkbox"/>	213
8 am – 5:30 pm	<input type="checkbox"/>	192
8 am – 4:30 pm	<input type="checkbox"/>	169

2 days (Circle – M T W Th F) Infants only
(6 wks – 18 mos.)

<u>Time</u>	<input type="checkbox"/>	<u>\$/wk</u>
7 am – 6:30 pm	<input type="checkbox"/>	180
7 am – 5:30 pm	<input type="checkbox"/>	162
7 am – 4:30 pm	<input type="checkbox"/>	146
8 am – 6:30 pm	<input type="checkbox"/>	162
8 am – 5:30 pm	<input type="checkbox"/>	146
8 am – 4:30 pm	<input type="checkbox"/>	129

Additional hours available on a space-available basis with pre-approval from Director.

*A one week notice (in writing) is required to change schedule.