



## Enrollment Application

1. \_\_\_\_\_ Enrollment fee is \$100 per student, a one time fee, not part of tuition.
2. \_\_\_\_\_ Fee is not refundable, unless a position is not available.
3. \_\_\_\_\_ This application is valid when accompanied by \$100 enrollment fee.
4. \_\_\_\_\_ Once tuition has been paid, slot will be held for the student.

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Guardian's Name: \_\_\_\_\_ Referred From: \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Cell Carrier: \_\_\_\_\_

**Monday:** \_\_\_\_\_ - \_\_\_\_\_

**Tuesday:** \_\_\_\_\_ - \_\_\_\_\_

**Wednesday:** \_\_\_\_\_ - \_\_\_\_\_

**Thursday:** \_\_\_\_\_ - \_\_\_\_\_

**Friday:** \_\_\_\_\_ - \_\_\_\_\_

Requested Start Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Tuition Child 1        \$ \_\_\_\_\_

Tuition Child 2        \$ \_\_\_\_\_

Total                    \$ \_\_\_\_\_

I/We (parent/guardian) \_\_\_\_\_, as Client(s) agree to pay \$ \_\_\_\_\_ per month to Bend Immersion Preschool for the time in the schedule below for (student) \_\_\_\_\_ under the terms and conditions specified in the school handbook. Tuition is assessed monthly and must be pre-paid before childcare/preschool begins. Tuition rates are based on the amount of days and hours selected on this form.

- \_\_\_\_\_ I agree to pay the Late Pay charge of \$20 per day, each day my payment is late.
- \_\_\_\_\_ My payment is due on the 1st of this month for next month.
- \_\_\_\_\_ Tuition increase is for January tuition each year.
- \_\_\_\_\_ Notice given this month, makes NEXT month, your last month. Notice is for dropping hours, moving onto kindergarten or moving out of the area.
- \_\_\_\_\_ Adding hours will mean the new tuition needs to be paid and a new tuition form signed, prior to attending.
- \_\_\_\_\_ Accounts not in good standing will be sent to collection. Client agrees to pay all associated fees with collection or court costs.

I have understand and agree to abide by the terms of this agreement.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

Paid by: Cash Check \_\_\_\_\_ Date Contacted for Enrollment \_\_\_\_\_

Date of Enrollment Meeting \_\_\_\_\_ Tuition paid \_\_\_\_\_ Start Date \_\_\_\_\_