

Early Explorers Preschool  
67 Church Street  
Montclair, New Jersey 07042  
(973) 985-4061

**Tuition/Fee Agreement 2015-2016**

Agreement between \_\_\_\_\_ and Early Explorers Preschool  
(Parent or Guardian)

For enrollment of \_\_\_\_\_ starting \_\_\_\_\_  
(Child's Name) (Start date)

**Monthly Tuition:**

I understand that the **Preschool Tuition** for my child will be \$\_\_\_\_\_ monthly. I agree to pay the monthly tuition, fees, and any additional charges, if applicable, by the due date on my monthly bill. I understand that there are no rebates for absences, snow days or scheduled Early Explorer holidays. If additional hours are added to my present schedule, I understand I will be billed at \$10.00 per hour.

**Late Pickup Fee**

I agree to pay a late pick up fee if my child/children remain at Early Explorers beyond the scheduled pickup time. A late pick up fee of \$10.00 will be charged for every 10 minutes segment I am late. Ex 1-10 minutes = \$10.00, 11-20 = \$20.00 etc.....

**Late Payment Fee**

I understand a late fee will be charged to my account if payment is not received by the due date. The late payment fee will be billed according to the following schedule. 1 to 5 days late = \$20.00, 6-10 days late = \$40.00, 11+ days late = suspension of services.

**Non-Refundable Registration Fee**

I agree to pay a non-refundable registration fee of \$50 at the time I register my child. I understand that this fee will not be refundable to me should I withdraw my registration.

**Medical Care**

I understand that in the event of an emergency my child will be transported/treated by the local emergency services.

**Voluntary Withdrawal**

I am required to submit a written withdrawal notice at least two weeks prior to removing my child from Early Explorers Preschool.

**Insufficient Funds**

I understand that I must pay a \$25 fee for all returned checks.

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_