

St. James Preschool Financial Agreement

I agree to pay a monthly tuition of:

_____ \$175.00/mo Tuesday, Wednesday and Thursday 9:00-11:30
_____ \$175.00/mo Tuesday, Wednesday and Thursday 12:00-2:30

_____ I would like information regarding tuition assistance options.

I understand that payment is due between the 1st and 7th of each month, beginning September through May. There will be a \$5 per school day late fee for tuition paid late. There is a \$20 returned check fee.

I understand that there will be no refunds for days absent. My child may be withdrawn if my payment is delinquent for 1 month or more. Please see school's administrator to discuss financial issues.

I agree to notify the school one month in advance of withdrawal should that be necessary. I understand I am obligated to one-half month's tuition without notification of withdrawal.

I have read the Parent's Handbook and understand my financial obligations.

Signed: _____ Date: _____
Parent or Guardian

All financial information is kept confidential. Please see the administrator regarding financial concerns.