

FRIENDSHIP PRESCHOOL CONTRACT AND REGISTRATION

We, the undersigned parents (or guardians), hereby register our child, _____
for the school year of _____ in Friendship Preschool. We agree to pay the required tuition for
the school year of \$_____.

Class Preference Morning _____ Afternoon _____
(I understand I may not be able to receive my first preference.)

Child's Full Name _____ / _____
(name to be called)

Birth Date _____

Address _____

Zip Code _____ Phone _____ Cell Phone _____

Father's Name _____ Mother's Name _____
(parents names as they should appear on class list)

Father's Business Phone _____ Mother's Business Phone _____

Two Emergency Names & Phone Numbers: (other than parents, doctor or long distance)

1. _____ Phone _____

2. _____ Phone _____

AN \$85.00 REGISTRATION FEE MUST ACCOMPANY THIS FORM FOR APPLICATION TO BE COMPLETE. THIS FEE IS NOT REFUNDABLE UNDER ANY CONDITIONS.

Signature of Parent or Guardian

Date

TERMS AND CONDITIONS OF ENROLLMENT

1. The \$85.00 registration fee is NOT REFUNDABLE under any conditions.
2. The tuition for September, October and May is due in September. Balance of tuition is payable in November, and February by the 10th of the month in equal amounts.
3. If your child is withdrawn after the 15th of the month you are responsible for the full month's tuition. No refunds will be made due to illness or quarantine regulations affecting your child and/or the group.
4. A school medical form completed and signed by physician I required to be on file by the start of school for each child.
5. Parent names, addresses & phone numbers will be published on class lists, which are made available to all school families.
6. Parents provide the snack & drink on a rotating basis.