

# Little Hearts Preschool

## Summer Enrollment 2 1/2-3rd Grade

_____		_____	
Last Name		First Name	
_____		_____	
Street		City, State, Zip	
_____		_____	
_____		<input type="checkbox"/> <input type="checkbox"/>	
Home Phone		Date of Birth	
_____		_____	
_____		Boy Girl	
_____		_____	
Contact		Phone	
_____		_____	
E-mail		Alt Phone	
_____		_____	

**Preferred Day** (Circle One)

**9 AM-11:30 AM**

Monday/Wednesday

Tuesday/Thursday

Non-Potty trained Fee

\$200

\$200

\$7.00/Mo

Little Hearts Preschool's admission policy is nondiscriminatory in regard to race, color, religion, national origin, ancestry, physical handicap, or sex.

The undersigned parent (or guardian) hereby registers his/her child for the current Summer Program at Little Hearts Preschool

I agree to pay the following fees to be paid as follows:

Non-refundable Enrollment Fee:

**One time** Enrollment/Activity Fee of \$30.00 due at enrollment.

I understand that my child may be withdrawn and payments stopped after a **2 week notice** is given to the Director. I understand that because of commitments of the school, refunds or prorating of tuition will not be made.

I understand that the required completed forms: Parent Agreement, Personal Data Form, a Health Assessment, and an Emergency Form are to be on file in the Preschool office before the child can start preschool.

I understand that the Preschool may terminate this contract after enrollment, in which event the school will refund the pro-rated portion of the student's tuition fee.

\_\_\_\_\_

Parent's Signature Date

**Check** \_\_\_\_\_ **Date** \_\_\_\_\_ **Amount** \_\_\_\_\_