

Sacred Heart Catholic Preschool TUITION AGREEMENT 2024-2025

LIC#503810275

I (We), the parent(s) or le 2043-2025:	gal guardian(s) of		agree to the following for the academic year of	
To pay tuition of \$	monthly/yearly (ci	rcle option):		
Tuition Monday-Friday	AM Class 8:00 AM-12:00 PI	<u>M</u>		
Five Mornings	\$440 per month/\$444	0 per year		
Four Mornings	\$389 per month/\$3890 per year			
Three Mornings	\$318 per month/\$318	\$318 per month/\$3180 per year		
Two Mornings	\$266 per month/\$266	0 per year		
Drop-in	\$36/day			
Tuition Monday-Friday FULI Five Full Days	Day Class 7:00 AM-6:00 PN \$746 per month/\$74			
Four Full Days	\$601 per month/\$6010 per year			
Three Full Days	\$474 per month/\$4740 per year			
Two Full Days	\$330 per month/\$33	00 per year		
Drop-In \$42/day	Add Lunch & Nap \$27/day			
the 15th of each month, I (w	re) shall pay a late fee of \$2 atholic Preschool until all o	5.00 per each late pa	the 15 th of each month. If payment is not received by ayment. I (we) also understand that my/our child may paid in full, including late fees. I (we) understand that a	
that if I am unsuccessfu understand that I am/w required hours, I (we) w B. I (we) agree to read and	I in raising the \$100 profit I e are responsible for eight vill be billed \$125 per hour t I comply with the philosoph	(we) will be billed fo (8) volunteer hours be following the last eve ny, goals, policies, and	ortunities supplied by SHCS. I (we) further understand in the remaining amount in May. I (we) further by the end of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year. If unable to complete the ent of the school year.	
Parent(s) or Legal Guardian	(s) signatures(s):			
Signature	Date	Signature	Date	

Signatures of both parents/legal guardians are required if both are to be held financially responsible. rev.02/02/2024