

**Mount Olive Lutheran Preschool
Tuition Payment Agreement 2009-2010 School Year**

Child's Name _____

1. I will abide by all policies as stated in the Mt. Olive Lutheran Preschool/Daycare Policy Manual.
Yes _____ No _____

2. I agree that tuition/daycare payments will be made on time (see #3).
Yes _____ No _____

3. I choose to pay: (Check one)
_____ Year (due on or before your child's first day of preschool)
_____ Semester (due on or before first day and on 1/1)
_____ Quarter (due on or before first day and on 11/1, 1/1, and 3/1)
_____ Month (due on or before the first day and the first day of the next 8 consecutive months)

4. I understand that Mt. Olive Lutheran Preschool and Daycare are a nonprofit organization that relies completely on tuition to pay operating expenses. If tuition/daycare payments cannot be made because of an emergency situation in my family, I must inform the Administrator and/or Business Manager immediately so that a plan can be agreed upon to resolve tuition payments.
Yes _____ No _____

5. I understand that nonpayment of tuition over 30 days may result in the dismissal of my child from the preschool/daycare program.
Yes _____ No _____

Signed _____ Date _____
Parent or Legal Guardian

Special note: If a person other than a parent is financially responsible, please read the following statement and sign on the line below.

My signature indicates that I agree to abide by items listed above.

Signed _____ Date _____

