

NCUMP

Newport Center United Methodist Preschool
1601 Marguerite Ave. Corona del Mar, CA 92625
Phone (949) 644-0740 Fax (949) 644-9035 Email: preschooloffice@ncump.org

Student Enrollment Contract Kidz Klub

Child's Name _____ Program _____ Family # _____

PROGRAMS FOR THE SCHOOL YEAR AUGUST 2021-JUNE 2022

<u># of Days per wk</u>	<u>Hours</u>	<u>Monthly Tuition</u>	<u>Deposit</u>
___ 1	12:30-4:00	\$240	\$240
___ 2	12:30-4:00	\$480	\$480
___ 3	12:30-4:00	\$720	\$720
___ 4	12:30-4:00	\$960	\$960
___ 5	12:30-4:00	\$1200	\$1200

Cost of program is \$60 per session

THE FOLLOWING IS DUE AT THE TIME OF REGISTRATION: deposit equal to one month's tuition and a signed contract with a valid credit card for billing.

PAYMENT SCHEDULE AND TERMS OF PAYMENT: All programs are charged based on a Monthly Basis

WITHDRAWAL AND REFUND POLICY:

1. The initial deposit is not refundable.
2. 30 days written notice is required for withdrawal from the program.
3. Credit cards will be charged each month for the following month's tuition unless written notice of withdrawal is received with the required 30 day notice.

Parent's Initials: _____: By initialing, I confirm that I have read and understand the WITHDRAWAL AND REFUND POLICY FOR THE KIDZ KLUB PROGRAM.

All withdrawals must be in writing. It is the Parent's responsibility to confirm that the written withdrawal notice is received by the Preschool Office. As a condition of the enrollment of my child in the Newport Center United Methodist Preschool (NCUMP), the undersigned consents to and will comply with the policies set forth above and in the Parent Handbook.

SIGNATURE OF THE PERSON WHO IS FINANCIALLY RESPONSIBLE FOR THE PAYMENT OF THE FEES OUTLINED ABOVE:

Printed Name _____ Signature _____

Phone # _____ Email _____ Date Signed _____

Credit Card Information for deposit and monthly billing

Name on Card _____

Billing Address for Card _____

Card Number _____

Expiration Date _____ CVC# _____