REGISTRATION AGREEMENT

Start Date: _____

A space has been reserved for your child/children at Discovery Days Learning Centers. The annual registration fee per family is $150.00 and is **NON-REFUNDABLE**. The fee is due at registration and annually on July 1st. This fee is also due if there are any changes to its content. All payments on accounts are **NON-REFUNDABLE**.

CHILD'S NAME	DOB	CLASSROOM	TUITION
CHILD'S NAME	DOB	CLASSROOM	TUITION
CHILD'S NAME	DOB	CLASSROOM	TUITION

Transportation($25/Weekly): _____
SCHOOL CHILD/CHILDREN ATTEND

Weekly Tuition Total: $ _____

Transportation Total: $ _____

RATES ARE THE SAME REGARDLESS OF HOLIDAY OR ABSENCE AND ARE SUBJECT TO CHANGE. NON TE PROGRAMS REQUIRE AN ADDITIONAL $15.00 PER WEEK PER PROGRAM.

PARENT NAME **SOCIAL SECURITY NUMBER** **PARENT DATE OF BIRTH**

ADDRESS

EMAIL **PHONE**

PARENT SIGNATURE **DATE**

DIRECTOR SIGNATURE **DATE**