



**Soule Early Childhood Center**  
 652 Hammond St, Brookline, Ma 02467  
 Phone 617.739.7598 Fax 617.739.7594  
[www.brooklinerec.com](http://www.brooklinerec.com)

**Pre-School Contract  
 September 2018-June 2019**

**Child's Information:**

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Gender:**  Male  Female

**PRE-SCHOOL (2.9 – 5.0 years old)**

<b>Time 8:00AM – 12:30PM</b> Monthly Tuition Cost	<input type="checkbox"/> 5 days (Mon-Fri) <b>\$ 1025.00</b>
<b>Time 8:00AM – 4:00PM</b> Monthly Tuition Cost	<b>Five Mornings/Five Afternoons</b> <input type="checkbox"/> 5 days (Mon-Fri) <b>\$ 1792.00</b>

**Payment Schedule (Please read carefully)**

- A non-refundable **registration fee & DEPOSIT ARE DUE WITH ENROLLMENT:**
- The deposit is credited to September (or first months) tuition
- **Half Day: \$ 1175.00**
- **Full Day: \$ 1942.00**
- **A proof of residency is required** at the time of enrollment. Acceptable documentation includes current utility bills, tax documents, and lease or mortgage documentation. Enrolled child must reside full time in Brookline.
- **Loss of enrollment space may result for deposit not received with enrollment.**
- All payments begin **October 1, 2018**. All payments are due the first of every month.
- Deposit given upon enrollment will be credited towards **September 2018 tuition** or first month of care when a 30-day written notice is given.

**Payment Method**

- Automatic tuition payments through Brookline Recreation (Credit Card Authorization form required).
- Payments may be made on line through our website ([www.brooklinerec.com](http://www.brooklinerec.com)) and by logging into your personal household.
- Accepted forms of payment: Check payable to Town of Brookline, money order, Visa and MasterCard.

**Pre-School Yearly Contract 2018-2019**

**The conditions that apply to the payment contract:**

**Parent Initials**

<ul style="list-style-type: none"> <li>• A non-refundable registration fee of \$150.00 is <b>required at the time of enrollment.</b></li> <li>• A one month <b>non-refundable</b> deposit is due with enrollment.</li> <li>• <b>Deposits will be credited to September 2018 tuition payment or first month of care when a 30 day written notice is given.</b></li> </ul>	
<ul style="list-style-type: none"> <li>• A proof of residency is required at the time of enrollment. Acceptable documentation includes current utility bills, tax documents, and lease or mortgage documentation.</li> </ul>	
<ul style="list-style-type: none"> <li>• All regular payments begin October 1, 2018.</li> <li>• All payments are due the first of every month.</li> <li>• A late fee of \$25.00 will be charged to your monthly bill if full payments are not received at the school by the due date.</li> </ul>	
<ul style="list-style-type: none"> <li>• A 30-day withdraw policy is required.</li> <li>• If 30-day notice is not given in writing, you will be billed for the next monthly billing cycle.</li> <li>• Daily prorating will not be accepted during the withdrawal period.</li> </ul>	
<ul style="list-style-type: none"> <li>• A late fee of \$1.00 per minute will be charged for late pick up after your contracted time.</li> <li>• Late fee is charged after: 12:35P or after: 4:05P</li> </ul>	
<ul style="list-style-type: none"> <li>• A \$25 fee will be charged for all returned checks.</li> </ul>	
<ul style="list-style-type: none"> <li>• A \$25.00 fee will be charged after the 2nd change to your schedule. All schedule changes required a 30 day written notice.</li> </ul>	

***All information on this application and supporting documentation will be used to determine eligibility for child care. I certify that the information provided is correct and complete to the best of my knowledge. I agree to pay all monthly fees to the authorized child care provider. I understand that providing false or misleading information in connection with this application and/or failure to report within ten days any change in circumstances that might impact my eligibility or fee may result in termination of the child care center.***

**Parent Signature** \_\_\_\_\_

**Parent Print Name** \_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_ 2018