

2017-2018 Enrollment Contract

Child's Name:		DOB:	
Age:	G	rade Level:	
<u>Program</u>	<u>Hours</u>		Annual Tuition
Primary III / Kindergarten		August 1 st – May 1 st	
Kindergarten	8:30 – 2:50	()\$680	\$6,800
With After Care	8:30 – 4:00	()\$770	\$7,700
With Extended After Care	8:30 – 5:30	()\$860	\$8,600
Lower Elementary (1st – 3		() +	¥ = 7 = = =
Lower Elementary	-	()\$695	\$6,950
With After Care	8:15 – 4:00	()\$785	\$7,850
With Extended After Care	8:15 – 5:30	()\$875	\$8,750
Upper Elementary (4 th – 6	•		
Upper Elementary	8:15 – 2:50	()\$705	\$7,050
With After Care	8:15 – 4:00	()\$795	\$7,950
With Extended After Care	8:15 – 5:30	()\$885	\$8,850
Before Care Program	7:30 – 8:15	()\$35	\$350
5% Sibling Discount		\$	
Total Monthly/Annual Tuition	Payment	\$	
Returning Student Registrat	tion Fee ()\$20	00 Before February 25	s th ()\$250 After February 25 th
New Student Registration Fe	ee	()\$250	
Kindergarten Annual Supply	y & Activity Fee	()\$200	
Elementary Annual Supply 8	& Activity Fee	()\$350	
Tuition Payment	•	, ,	
•	cademic year. The	absence of a student doe	es not materially decrease the expenses of the
school. Parents are responsible f	or payments in full	for the academic year. T	uition is paid for missed days. Tuition and fees a
nonrefundable for any reason. Th	ne tuition is preset t	o deduct holidays and the	allotted snow days from your tuition payments;
therefore, tuition is still due and p	ayable. Tuition pay	rments are nonrefundable).
• •		•	th the payment indicated on the front side).
• •			full. One lump sum payment in the amount base
	-	_	t 1 st . All tuition is due prior to attendance.
• •			nt based upon the ten (10) month academic yea on or before January 1st. All tuition is due prio
attendance.	iore August i	ie secona payment is auc	son of before samuary 1st. All tultion is due prio
	equal monthly pay	ments each payable on the	ne 1st day of the month. All tuition is due prior to
attendance. The first tuition paym		• •	-
Sibling Discounts: A (5%) tuition dis	scount will be granted	for each additional child from	n the immediate family attending simultaneously.
I/we, the undersigned, e	enter into the above	contract with BRMS at th	ne above noted tuition for the 2017/2018 academ
year. I/we understand that it is my	y/our obligation to p	oay said registration fee ir	n order to enroll my/our child(ren) for the 2017/20
-	-		t no portion of our registration or tuition will be
		-	payments are due the first day of the month
			O will be applied for non-payment on the 15 th day
-			r an attorney, I am financially responsible for all ssori School in attempting to collect on my accou
	·		
•			ionship to Student
			Email
		City	Phone
Office Use Only			

Registration Fee: _____ Amount Paid: _____ Date Received: ____ Received By: _____