



Mary, Mother of God Church
157 South Triangle Road
Hillsborough, NJ 08844
(908) 874-8489

Mary, Mother of God Preschool

ENROLLMENT AGREEMENT

Student Name: _____ Birthday: _____

Home address: _____ Phone: _____

Parent/Guardian name: _____ Phone: _____

Email: _____ Work address: _____

Parent/Guardian name: _____ Phone: _____

Email: _____ Work address: _____

Start date: _____ Class: _____ Program: _____

Registration fee: _____ Due: _____ Initial: _____

Annual tuition: _____ Paid in full, 5% discount paid: _____ Initial: _____

Annual tuition - monthly payment tuition: _____ Due: _____ Initial: _____

Every monthly tuition payment from starting month until June is due the 15th of the month before. Initial: _____

Tuition unpaid the 15th of the month – a \$30 late fee will be charged. Initial: _____

Tuition unpaid two consecutive months student may not return until tuition and late fee paid. Initial: _____

Students must be picked up promptly at dismissal time. While emergencies can occur, every effort must be made to call the school. There will be a charge of \$1 per minute for every minute a student is at the school. Initial: _____

Withdrawing your student from the school requires written notice 30 days in advance. Initial: _____

Every effort will be made for school to be open. Emails will be sent for any schedule changes. Initial: _____

Mary, Mother of God is closed for Christmas week, Spring Break and Summer Break. Initial: _____

We are unable to schedule make-up days or give tuition credit for missed days. Initial: _____

I, _____, agree to the above enrollment agreement. I understand my responsibilities to Mary, Mother of God Preschool.

Parent Signature: _____ Date: _____

Director Signature: _____ Date: _____