APPLICATION FOR 2012-13 FULL DAY KINDERGARTEN

PLEASE PRINT and complete all information.

Child's Name: _____

Date of Birth: _____ Sex: (please circle) Male Female

Parent(s) Name(s): _____

Address: _____

_____

Telephone #: _____

Email: _____

ENROLLMENT AGREEMENT

If accepted into the program, I agree to be bound by the following procedures of the Abington Public Schools Kindergarten program:

1. I agree and acknowledge that the tuition for the Kindergarten program is non- refundable.
2. I understand that a non-refundable deposit is due prior to my child beginning the Kindergarten program in order to reserve a space. This deposit will be deducted from my tuition. If the program is unable to place my child due to space limitations, my deposit will be refunded.
3. I understand that monthly tuition payments are to be made by the 20th of each month.
4. I understand that if my payment is not received by the 1st of the month, I will forfeit my child's space in the program.
5. I understand that if payments are not made according to the payment schedule my child may be excluded from the Kindergarten program.
6. I agree and acknowledge there will be no refunds due to absence or school closings due to weather and other emergencies.
7. Checks should be payable to: **Abington Public Schools** and mailed or delivered to:
   Center School, 65 Thaxter Avenue, Abington, MA 02351.

TUITION SCHEDULE

5-Day Program (check one option)

__ Full tuition payment $2900 ($3050 minus $150 non-refundable registration fee)

__ Monthly Payment** $2900 divided into 8 payments of **$362.50.**

**** First payment is due by August 20th. Final payment is due by March 20th.**

By signing below, I agree to the terms and conditions of the Enrollment Agreement and Tuition Schedule.

Parent/Guardian Signature: _____ _____ Date:_____

RETURN: Application and non-refundable Registration fee of $150 to:

Center School
Attn: Kindergarten
65 Thaxter Avenue
Abington, MA 02351

Applicants will be considered as completed applications with non-refundable registration fee are received. You will be notified of your child's placement on or after February 20th.

For office use only: Date Rec'd: _____ Reg Fee Rec'd _____ Placement: _____ Waitlist: _____

Abington Public Schools does not discriminate on the basis of race, color, sex, age, religion, disability, national origin or sexual orientation.

APPLICATION FOR 2012-13 FULL DAY KINDERGARTEN

ABINGTON PUBLIC SCHOOLS KINDERGARTEN PROGRAM
Tuition Schedule
2012-2013

Student Name (Please Print):_____

Parent/Guardian Name (Please Print):_____

Please check one:

5-Day Program

____Full tuition payment $2,900 ($3,050 minus $150 non-refundable registration fee)
____Monthly Payment**$2,900 divided into 8 payments of $362.50

****First payment is due by August 20th. Final payment is due by March 20th.**

By signing below, I agree to the terms and conditions of the Enrollment Agreement and Tuition Schedule.

Parent/Guardian Signature:_____Date:_____

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