Baby House 3502 Easter Stanley Road, Tallahassee, Florida 32308 www.thelearningpavilion.org (850) 921-KIDS(5437)



Preschool 3519 Easter Stanley Court, Tallahassee, Florida 32308 www.thelearningpavilion.org (850) 921-KIDS(5437)

				I UITION A	GREEMEN [*]	Τ			
Parent Information: Responsible Party for Tuition Payment:						_ DOB:	<i></i>	SSN:	
Billing Address:									
Street				City		State		Zip Code	
Phone: Work Phone		: Employer:							
Child's Name		D.O.B	PT/FT	Expiration Date	Approved Rate	Parent Fee	AVG ELC mo.	Calculate the ELC Average payment by: Approved rate – Parent Fee= Y Y x 21.75 =	
								ELC Average payment	
		<u> </u>	I	1	l	1			
Name: Name:				Name:		Name:		Agreement Expiration Date:	
Private Pay Rate		Private Pay Rate		Private Pay Rate	е	Private Pay Rate			
ELC (blue box)		ELC (blue box)		ELC (blue box)		ELC (blue box)		Child's birth date or ELC Exp. whichever occurs first.	
Total		Total		Tot	-	Total			
Multi-Child (10%)		Multi-Child (10%) Total		Multi-Child (10%	o)	Multi-Child (10%) Total		Add the yellow boxes and put the	
Total Employee (25%)		Employee (25%)		Total Employee (25%	1	Employee (25%)		total in the green box below to get	
Total		Total		Tot			otal	the Parent monthly.	
To obtain prorated an	oserved ho	e the Parent Monthly To		e Green box and c	divide it by 21.7	5, then multiply b	y the days of co	are for the remainder of the d \$25 each additional child with a	
Start Date: Prorated Ra		te: <u>\$</u> Registration Fee: <u>\$</u>		Amo	ount Due first c	day of Enrollment: \$			
Notes:									
Director/Administrator Signature			Date	Date Parent Signatu		e		Date	
Vice President Signature of Vi		nly required when waiv	Date ing the reg	gistration fee or any	other reduction	ons in owed tuitior	٦.		

