

Village Montessori School  
Financial Responsibility Form

Please complete, sign, and return this form to the school before your child's start date.

I/We are enrolling our child, \_\_\_\_\_, in Village Montessori for the 2014-2015 school year.

Our child will attend:                      Half-Day                      School Day                      Extended Care

We will pay tuition:                      Monthly                      Quarterly                      Annually

We agree to pay the annual fee:                      Monthly                      Quarterly                      Annually

We prefer to receive our invoices via:                      E-mail: \_\_\_\_\_                      Our child's folder

Credit Card Number to have on file: \_\_\_\_\_

Exp.: \_\_\_/\_\_\_/\_\_\_\_                      CSV: \_\_\_\_\_

*In signing below, we acknowledge the following:*

I/We have read the Village Montessori Parent Handbook and accept the financial responsibilities and policies described therein.

I/We understand that absences (for any cause) are nonrefundable. We also understand that school closings for holidays, inclement weather, parent conferences, school repairs, etc. are nonrefundable.

I/We understand that our payments are due on the first of the month and that payments not made by the 4<sup>th</sup> will be charged to the credit card listed above, along with the current credit card processing fee of 3.5% of the transaction total.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_