

LOWELL COMMUNITY PRESCHOOL
9 - MONTH AGREEMENT

Child's Full Name: _____ Age ____ DOB _____

OPTIONS (Choose ONE):

___A. Pre-Kindergarten (one school year until Kindergarten)

Tuesday/Wednesday/Thursday

8:15am-11:15am

\$75.00 Registration Fee

\$125.00 per Month

*Pay up front for 9 months (\$1125.00 total) and have the Registration Fee waived.

___B. Preschool Ages (two school years until Kindergarten)

Tuesday/Wednesday/Thursday

8:15am-11:15am

\$75.00 Registration Fee

\$125.00 per Month

*Pay up front for 9 months (\$1125.00 total) and have the Registration Fee waived.

How would you like to be notified about preschool announcements?

Email _____ Text Message _____

I agree to the terms checked above. I read, understand and agree to the information in the Lowell Community Preschool Parent Handbook.

Print _____

Sign _____ Date _____