



ENROLLMENT CONTRACT SCHOOL YEAR 2024-2025

(Please complete one form per child)

Child's Name: _____

Parent/ Guardian: _____

Parent/ Guardian: _____

TERMS OF THE ENROLLMENT CONTRACT:

Initial Enrollment Fee (New Student)

I, the undersigned parent/guardian, do hereby agree to deposit an amount of \$500 as a non-refundable enrollment fee for my child, including any siblings, to reserve a place for my child. Additionally, I understand that, for any NIDO child (3 months – 18 months), I would be required to make a one-month tuition deposit with this enrollment contract.

Re-Enrollment Fee (Returning Student)

I also understand that, if my child had been a student for the 2023-24 academic year, upon the effective date of this contract, I will agree to be charged a \$300 non-refundable re-enrollment fee. I also will agree to a \$700 deposit towards tuition which will be applied to the first tuition payment. After June 1, 2024, this \$700 tuition deposit will be non-refundable.

Tuition Information and Payment:

I, the undersigned parent/guardian do hereby understand that all tuition is for the school year and is not prorated for holidays, vacations, illness, or other non-attendance or non-operating days. For any start dates that begin after the originally scheduled first day of school, tuition will be prorated accordingly. I understand that all tuition will be collected via FACTS, Crossway's Tuition Management Company. I agree to enroll in FACTS.

Tuition Payment Options:

I have reviewed the following three payment options and have chosen the one I have initialed below.

A. One Payment - The full tuition payment is due on August 15, 2024 or the first business day of the month of my child's start date.

Initials _____



Child's Name: _____

B. Two Payments - The first tuition payment is due August 15, 2024. The second tuition payment is due on January 15, 2025.

Initials _____

C. Ten Monthly Payments - The monthly payment plan is applicable from August 15, 2024 through May 15, 2025.

Initials _____

Family Tuition Assistance: Sibling Discount

I understand that families of Crossway Montessori Communities may receive family tuition assistance for multiple children enrolled in the Young Children's Community through the New World Community. Parents may request assistance in the amount of \$1000 for the second child; each additional child may receive assistance in the amount of \$1500.

Late Fees - Tuition Payment:

I understand that a late fee of \$25 will be charged by FACTS on the first business day after a missed payment and on each additional processing attempt. After one month of non-payment, I understand that I must contact the Business Office to make alternate payment arrangements and that my child will not be able to attend school until payment arrangements have been made.

Withdrawal from School Policy:

I understand that, if I subsequently decide to withdraw my child from the school, I must submit a written letter of intent to that effect to the Head of School and for the purpose of efficient administration of the school, state the circumstances relating to the reasons for my decision to withdraw my child before the end of the contract.

I understand and agree that, if I subsequently decide to withdraw my child from school/ or if the school dismisses my child for any reason, tuition liability shall be due in accordance with this enrollment contract. All tuition and fees are due in full at the time of withdrawal/dismissal.

In the event of any withdrawal after the **first day of school in 2024 and before February 1, 2025**, I understand that I will be responsible for two months tuition after the withdrawal date stated in the written letter of intent. In the event of any withdrawal after **February 1, 2025**, I will be responsible for tuition for the balance of the school year.



Child's Name: _____

Refund Policy:

I understand that, subject to the above stated withdrawal from school policy, the obligation to pay the fees for the full academic year is unconditional.

Schedule Changes:

I understand that requests to change days and/or hours are considered on a space available basis and must be made in writing and is subject to a \$25 fee for any schedule change.

Late Pick-up Fees:

I understand that with respect to any pick-up after the school's published closing time **at 3:00 p.m.**, I will be charged a fee of \$2 per minute for the first 5 minutes and \$5 per minute after the first 5 minutes.

Forms:

Any additional school forms must be completed and submitted prior to the first day of school.

Emergency Closures:

Additionally, the duties and obligations under this Contract may be suspended indefinitely without notice during all periods in which Crossway Montessori Communities is closed due to any force majeure events, including, but not limited to, any earthquake, fire, flooding, act of God, war, governmental action, act of terrorism, epidemic, pandemic, state of emergency, or any other event beyond the Crossway Montessori Communities' control.

Crossway Montessori Communities has developed a contingency instruction plan to deliver remote instruction as soon as is reasonably practicable and safe under the circumstances. If such a force majeure event occurs, the School's duties and obligations in this Contract may be postponed for a period of time until the School can deliver its contingency remote course instruction or until such time as the School, in its sole discretion, may safely reopen.

In the event the School is closed for a period of time or must deliver course work remotely due to an event under this clause, I agree the School will be under no obligation to cancel, waive, or refund, any portion of tuition that is owed or payable to Crossway Montessori Community.



Child's Name: _____

Acceptance of Agreement:

I understand and agree that the issuance of this Enrollment Contract is based upon my child's full and complete admission application and continued satisfactory participation in the Crossway Montessori Program.

I understand and agree to all the terms, financial obligations, and policies set forth in this Enrollment Contract. Please sign below:

Parent/ Guardian Date

Parent/ Guardian Date

Acceptance by Crossway Representative Date

Crossway Montessori Community welcomes all students and families and does not discriminate in its hiring, admissions practices, or any other form of access based on race, religion, national origin, sexual orientation, gender identity/expression, sex, or disability.
