



MELC USE ONLY:

Received By: \_\_\_\_\_ New:  Change:  Termination:

Date Received: \_\_\_\_\_ Date Effective: \_\_\_\_\_

## WYNNEWOOD CENTER KINDERGARTEN PROGRAM

Child's Name:	Gender:	Birth Date:	
Address Where Child Resides: Street:	City:	State:	Zip:
Child Resides With: <input type="checkbox"/> Both Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other (Please Specify) _____		Primary Language Spoken at Home:	

Parent/Guardian 1 Information			
Name:	Home Phone Number:	Cell Phone Number:	
Email Address:	Employer/Workplace:		
Work Address:		Work Phone Number:	
Home Address: Street:	City:	State:	Zip:

Parent/Guardian 2 Information			
Name:	Home Phone Number:	Cell Phone Number:	
Email Address:	Employer/Workplace:		
Work Address:		Work Phone Number:	
Home Address: Street:	City:	State:	Zip:

Please select the program(s) needed.			
Full Day Kindergarten (9:00 am - 3:00 pm)	<input type="checkbox"/>		
Before School Care Program (7:00 am - 9:00 am)	<input type="checkbox"/>		
After School Care Program (3:00 pm - 6:00 pm)	<input type="checkbox"/>		
Does your child have an IEP? <input type="checkbox"/> Yes <input type="checkbox"/> No              Do you have ELRC? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Please briefly describe any special needs, disabilities, or allergies of your child. (Continue on back if needed)

Application Fee: <b>\$25 per child</b> at time of Application // Enrollment Fee: <b>\$50 per family</b> at time of Enrollment (Both Application and Enrollment Fees are Non-refundable)	<b>ENROLLMENT FEE IS WAIVED IF A SIBLING IS CURRENTLY ENROLLED.</b> Sibling Name: _____ Program: _____
---	---

MAIL TO: MONTGOMERY EARLY LEARNING CENTERS  
 230 Haverford Road  
 Wynnewood, PA 19096

Please be advised that completion of this application is not a guarantee of placement in our program. Once your application has been received, we will notify you if placement for your child is available.

**Signature of Parent or Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## WYNNEWOOD CENTER KINDERGARTEN PROGRAM

### 2019-2020 Kindergarten Program Tuition Schedule

Rates are based on a full time, 5 days/week schedule	Full Day Kindergarten	Kindergarten Before Care ONLY	Kindergarten After Care ONLY	Kindergarten Before and After Care
Total Yearly Tuition	\$10,250	\$1,350	\$2,150	\$3,350
10 Monthly Payments Of	\$1,025	\$135	\$215	\$335

Tuition is charged for ALL contracted days, regardless of attendance.  
Monthly payments are due prior to the 1<sup>st</sup> of the month beginning September 1, 2019.  
Service may be terminated if payment is not received in advance of service.

### Discounts

#### Advance payment discount

5 months paid . . . . . Save 1.5%  
10 months paid . . . . . Save 3%

#### Sibling discount

10% discount by type of service for older siblings  
who are enrolled full-time

Fees are subject to rate increase, regardless of advance payment.  
30-day advance notice will be given.

### Additional Information

<b>Escrow policy</b>	An initial deposit, equal to one month tuition, must be paid in full at time of enrollment. This deposit will be held in escrow throughout the course of service. <b>A withdrawal notice of one month must be given for escrow to be returned.</b>
<b>Application fee</b>	Non-refundable charge of \$25 per child at time of application.
<b>Enrollment fee</b>	Non-refundable charge of \$50 per family at time of enrollment. (Due after confirmation.)
<b>Late payment fee</b>	\$25
<b>Change in contracted schedule fee</b>	\$25 per change
<b>Convenience Fee</b>	There will be a 3% Convenience Fee added on to all credit or debit card payments

All fees are subject to change.  
We accept families funded through Early Learning Resource Center (ELRC)