



North Raleigh Church of Christ Preschool
nrcocpreschool.com

EARLY BIRD MONTHLY ENROLLMENT

Child's Name: _____

Date: _____

Teacher: _____

Allergies: _____

MONTH(S) of Early Bird Program (Circle all that apply)

Sept Oct Nov Dec Jan Feb Mar Apr May

DAY(S) each week child will be attending (Circle all that apply)

Monday Tuesday Wednesday Thursday Friday

Early Bird's discounted rate for the month are as follows:

CHILD MUST ATTEND THE SAME DAYS EACH WEEK

- 1 day a week: \$20.00 per month (ex. Every Monday of the month)
- 2 days a week: \$40.00 per month (ex. Every T/TH of the month)
- 3 days a week: \$60.00 per month (ex. Every M/W/F of the month)
- 4 days a week: \$70.00 per month (ex. M/T/TH/F of the month)
- 5 days a week: \$80.00 per month

Please initial that you understand the following:

_____ I understand that drop off time is 8:00am - 8:15am.

_____ I understand that I must pre-register my child each month for the program.

_____ I understand that enrollment in the Early Bird PProgram is month to month and can be dropped or added at the beginning of any month during the school year.

_____ I understand I must choose the same day(s) of each month for the entire month and the costs are considered monthly fees and must be paid in advance at the beginning of the month (no prorates are given for rates for absences, holidays, etc)

_____ I understand that these fees can be included in my tuition check if placed in the completed payment envelope and placed in the tuition box.

Parent/Guardian Signature _____

Date: _____