

Enrollment Contract

Student Name: _____ Math Reading
 Student Name: _____ Math Reading
 Student Name: _____ Math Reading

Tuition Rates: (1 or more students)

1 subject - \$105/month 3 subjects - \$290/month 5 subjects - \$470/month
 2 subjects - \$200/month 4 subjects - \$380/month 6 subjects - \$560/month

Initial Payment

1st Month _____ = _____
 (Tuition / 30 x # of days remaining in the month)
 Registration Fee (\$50.00 per student) = _____
 Deposit* = \$105.00
 Jr. Kumon Supplies Fee- if applicable = _____
 (\$25.00 per Jr. Kumon Student)
Initial Payment Due = _____

***Deposit**

If a student is going to drop out of a class, either temporarily or indefinitely for some reason, a **written notice is required at least 30 days before the effective date and the student's status must be current** (If your child is absent or takes break before withdrawing from the Kumon program, the deposit will not be refunded.) Failure to receive such notice will result in continued charges to your account. Your account will remain open and active until written notice is received. Your account will be closed 30 days after we receive your notice to terminate. In cases of medical or other emergencies where a 30-day written notice is impossible to give, please call us and we will do what we can to accommodate your situation.

Payment

Tuition is due on the first of the month. If tuition is paid after the 10th of the month, a late fee of \$15 will be charged to your account. The first month is pro-rated according to the day of the month enrolled. Full tuition is charged for all subsequent months until 30 days written notice is given to terminate enrollment.

Parent Agreement

It is my understanding that my child's success is linked to my active supervision of daily assignments at home. I agree to provide a 10-15 minute block of time per subject for the completion and correction of daily assignments. I will insure that assignments are timed, that errors are marked, and that mistakes are corrected by the student before beginning new work. I understand that completed and corrected assignments are used to develop and modify my child's individualized lesson plan. For this reason, I understand that new assignments will not be given (after a second subsequent absence) until previously assigned work is returned. I agree to make arrangements to drop off finished assignments and pick up new assignments if my child is unable to attend a regularly scheduled class by calling the Center before the beginning of the class session that my child will miss. I understand that if my child is absent for a regular class session and I have not made prior arrangements to pick up the work for that class, the work is forfeited until the next class session. I agree to notify the Center staff at least one class session in advance of any extended vacation in order to give the Instructor ample time to plan and organize work for my child's absence. I agree to communicate regularly with the Instructor about any questions, concerns, schedule changes and observations regarding my child's KUMON experience.

Parent's Signature(s): _____ Date: _____

Instructor's Signature: _____ Date: _____

Amount Paid: \$ _____ (check, cash, EFT, credit card) Check # _____ Balance Due _____