

DYNAMIC LIFE CHRISTIAN SCHOOL
 1600 John Marshall Highway, Front Royal, VA 22630
 (540) 636-9595
ENROLLMENT CONTRACT

Parent Name _____

Billing Address _____

City _____ State _____ Zip _____

Email _____ Home Phone _____

Name (List eldest student first)	Circle Day(s) of Week Attending	Age	Registration and Supplies	Weekly Tuition
Child 1 _____	M Tu W Th F _____	_____	\$ _____	\$ _____
Child 2 _____	M Tu W Th F _____	_____	\$ _____	\$ _____
Child 3 _____	M Tu W Th F _____	_____	\$ _____	\$ _____
Start Date _____			Totals \$ _____	\$ _____

(Initials) **Parent Agreement:**

- In order to secure enrollment, I, as the parent/guardian, agree to pay and deliver with this Enrollment Contract the non-refundable registration, book, supply fees, and the first week's tuition.
- I hereby agree to pay the weekly tuition amount shown on this contract for the Fall 2020-2021 program. DLCS reserves the right to deny admission if payments are not made by Monday at 12 noon. I understand that any additional fees such as meals, before/after care, or other miscellaneous charges will be billed to my account. School records, tax reports, and final report cards will not be released until all outstanding balances have been rectified.
- Due to fixed costs averaged over the entire year, **there is no reduction in tuition for days missed for any reason**, such as sick days, family vacations, school holidays, etc.
- If DLCS attempts to process an automatic tuition payment or deposit a check payment and the account has Non-Sufficient Funds, a NSF charge of \$15 and a late charge of \$15 will be added to said account.
- If a student is diagnosed with a learning disability that can not be managed in a regular classroom or setting without additional staff, by the advice of a physician or a licensed clinical professional, parent/guardian will be given the option to cancel the contract or to fully provide all necessary funds to educate the child (i.e. tutor, classroom aide, materials, etc.) This amount will be determined on an individual need & presented by school administration to the contract holder.
- Early withdrawal policy: This is a **CONTRACT** between students' parents/guardians and DLCS. DLCS commits to operating expenses for the school year based on enrollment. Therefore, students may not be withdrawn before the final session day unless released by the Director. Withdrawal from the school must be made in writing through the Director's Office and will result in a \$500 early termination fee.
- I have read and will abide by school policies as stated in the DLCS Student Handbook.

Parent Signature: _____

Tuition & Fees Worksheet:

Registration/Supply Total from above	\$ _____
Tuition Total from above	\$ _____
Potty Fee	\$ _____
Discount or Coupon	\$ < _____ >
Total Amount Due	\$ _____

If Previously Enrolled:

I have reviewed my contact information and no changes need to be made at this time. I know my information can be updated any time at www.myprocare.com. All permissions and releases still apply.

Parent Signature: _____

Date of Signature: _____

TUITION	Full Day
2-4 Year Olds	9:00 a.m.-3:00 p.m.

1 day a week	\$44.00
2 days a week	\$79.00
3 days a week	\$107.00
4 days a week	\$124.00
5 days a week	\$136.00

Kindergarten or 1st Grade	5 days a week, Monday-Friday	\$142.00
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ENROLLMENT FEES	Registration Fee	\$25.00	Supply Fee	\$150.00
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BEFORE & AFTER SCHOOL CARE	1 day a week	\$20.00
	2 days a week	\$36.00
	3 days a week	\$48.00
	4 days a week	\$56.00
	5 days a week	\$64.00

FOOD SERVICE	Breakfast	\$2.00	POTTY TRAINING - \$5.00/day
	Lunch	\$4.00	LATE PAYMENT FEE
	Snack	\$2.00	\$15.00