



Soule Early Childhood Center

652 Hammond St, Brookline, Ma 02467

Phone 617.739.7598 Fax 617.739.7594

www.brooklinerec.com

Child's Information: PLEASE PRINT OR TYPE Date of Birth: _____

First Name: _____ **Last Name:** _____ **Gender:** Male Female

Preschool: 2.9 – 4.9 years old

Start Date: January 2021 March 2021 School Year: September-June 2021-2022

<p>Half-Day (M-F)</p> <p>Time 8:00AM – 12:00PM</p> <p>Monthly Tuition Cost: \$ 1088.00</p>	<p><input type="checkbox"/> Five Mornings</p> <p><i>*No Lunch at School, until approve-per covid</i></p>
<p>Full-Day- (M-F)</p> <p>Time 8:00AM – 3:30 PM</p> <p>Monthly Tuition Cost: \$ 1900.00</p>	<p><input type="checkbox"/> Five Mornings/ Five Afternoons</p>

Toddler 15 months – 2.8 years old

Start Date: January 2021 March 2021 School Year: September-June 2021-2022

School Year

<p>Half-Day (M-F)</p> <p>Time 8:00AM – 12:00PM</p> <p>Monthly Tuition Cost: \$ 2000.00</p>	<p><input type="checkbox"/> Five Mornings</p> <p><i>*No Lunch at School, until approve-per covid</i></p>
<p>Full-Day- (M-F)</p> <p>Time 8:00AM – 3:30 PM</p> <p>Monthly Tuition Cost: \$ 2584.00</p>	<p><input type="checkbox"/> Five Mornings/ Five Afternoons</p>

Preschool & Toddler Contract

The conditions that apply to the payment contract:

Parent Initials

<ul style="list-style-type: none"> • A non-refundable registration fee of \$150.00 is required at the time of enrollment. • SCHOOL YEAR DEPOSIT 2021-2022: A one-month deposit is due by APRIL 1, 2021. • After APRIL the deposit and registration are due with the contract. 	
<ul style="list-style-type: none"> • All regular payments begin one month after the start of the program. • All payments are due the first of every month. • A late fee of \$25.00 will be charged to your monthly bill if full payments are not received at the school by the due date. 	
<ul style="list-style-type: none"> • I have reviewed and understand the Soule Early Childhood Center COVID-Action Plan and agree to comply with all health and safety regulations. 	
<ul style="list-style-type: none"> • I give permission for my child to use hand sanitizer when at Soule Early Childhood. 	
<ul style="list-style-type: none"> • I have read and understand the COVID-19 related polices for Soule Early Childhood Center. 	

All information on this application and supporting documentation will be used to determine eligibility for childcare. I certify that the information provided is correct and complete to the best of my knowledge. I agree to pay all monthly fees to the authorized childcare provider. I understand that providing false or misleading information in connection with this application and/or failure to report within ten days any change in circumstances that might impact my eligibility or fee may result in termination of the childcare center.

Parent Signature _____

Parent Print Name _____ **Date** _____