



## Happy Minds Kids Academy– Re-Enrollment Form 2017-2018

Child's Name: \_\_\_\_\_ Child's Birth Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ Gender: Male Female

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_

Father's Name: \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

E Mail : \_\_\_\_\_

Please read the Schedules and Tuition Rates sheet carefully. Tuition is based on a 10-month rate. Tuition is paid in 10 monthly payments September through June. Our Summer Program is separate and begins in July. Summer Registration is in May.

<u><i>Please circle desired schedule</i></u>	
Half Day	8:30 am-12:30 pm.
Full Day	8:30 am-3:00 pm.
Extended Day	7:00 am-5:45 pm.

<u><i>Please indicate desired days</i></u>	
2 days	_____
3 days	_____
5 days	_____

*To ensure your child's enrollment please sign below, attach your registration check and return to the office.*

**Non-Refundable Registration Fee \$125.00**

**Re-Registration Fee \$100.00**

I understand that tuition payments are not waived due to illness or vacation. I understand that a Thirty (30) day written notice is required should I choose to withdraw my child(ren). I understand that tuition is due on the 1st of each month and that a late fee will be assessed for any tuition paid after the 5th of the month.

Signature of Parent or Legal Guardian \_\_\_\_\_

Date \_\_\_\_\_

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Office Use Only Date received \_\_\_\_\_

Reg. Fee \_\_\_\_\_

Check # \_\_\_\_\_