



Payment Agreement

- Bright Minds Montessori currently accepts cash or check as form of payment. Tuition payments are made on a weekly basis only. If you have special circumstances and need to make an adjustment to your payment, approval from the Director is required, and the below policy is in place for late payments.
- I understand that tuition payments are due every Monday for weekly payments. If the school is closed on a Monday that tuition is due, it will be due on the 1st day the school reopens.
- I understand that if I fail to pay the tuition as agreed upon, I will be assessed a \$20 late fee and an additional \$5 per day thereafter; tuition is not paid by the following week, my child will be automatically discharged from Bright Minds Montessori unless I have made prior arrangements with the director.
- I understand that there will be no tuition refunds, discounts or deductions for holidays, illnesses, vacations, teacher in-service days, bad weather, or other reasons that the school may be closed.
- I understand that my child's enrollment will be terminated if I am late paying my tuition more than three times, (unless other arrangements have been made and approved by the Director)
- I understand that if I arrive after my child's dismissal time (12:00pm, 2:30pm or 6:30pm), I will be charged \$5.00 plus \$1.00 for every minute that I am late.
- I understand that in the case of withdrawal, fifteen days notice is required at the 1st of the month. In order to receive prorated tuition, a withdrawal letter must be on file in the school's office. Deposits, registration fees and supply fees are never refunded.
* **Student records will only be released if all financial obligations have been satisfied.**
- I understand that if I remove my child from Bright Minds Montessori without making all the due payments, the school has the right to report to the credit bureau. BMM will also report this delinquency to the neighboring schools.

Your child has been assigned to the _____ classroom.

The weekly rate is \$_____.

Discount: _____ Sibling _____ Employee

I have read and agree to the above Payment Agreement.

Parent Signature: _____ **Date:** _____