Payment Plan Addendum



In signing this agreement, we, as parents/guardians, realize that we are entering into a contract with Carol Nursery School agreeing to the full financial obligation of the current tuition rates established by the school. We agree to the terms and conditions stated below.

CAROL NURSERY SCHOOL

CAROL NOR	SERT SCHOOL			
Parent / Guar	dian Name(s):			
Home Address:		City:	State:	Zip:
		Email:		
Student Name	e(s):			
We wish to be	e placed on a payment pla	an according to the following terms:		
	August 15 th and Octob January 15 th and Marc Monthly Payment Pla Payments are due on	in two equal payments per semester, due per 15 th (1 st Semester) ch 15 th (2 nd Semester)	Лау.	ayments.
recognized un payment shou	nless in writing and signed uld be more than fifteen (re due and payable as stated herein. No d by an authorized agent of Carol Nursery (15) days late, the school shall have the rig emester tuition must be paid in full prior t	School and the undersigne ght to charge a late fee and	ed. In the event any d/or withhold any
All payment p	lans must be paid in full l	by May 15 th regardless of start date.		
after August :	15, 2020, in addition to t	essing fee of \$50.00, due upon submission he processing fee, an additional \$300.00 hen calculating the monthly or quarterly	initial payment must be in	•
Signature			Date	
Approved By: Carol Nursery				

This addendum, if approved, will act as the Alternative Payment Plan (as defined on the School Enrollment Contract).

Office Use Only: Deposit \$

Received by: Date:

Check #:

Class(es):