



## CASA REGISTRATION AGREEMENT

Hours of Attendance from: \_\_\_\_\_ to: \_\_\_\_\_

Annual Tuition \$ \_\_\_\_\_

In consideration of the acceptance by Wishing Well Montessori School of:

\_\_\_\_\_  
(Student's Name)

I agree to pay all tuition fees, child care expenses, registration fees, dues and other indebtedness incurred by the student or on the student's behalf while enrolled in the school. I understand that my obligation to pay tuition fees for the full academic year is unconditional although special consideration will be given in cases of prolonged absence due to medical reasons. If I choose to pay the fees monthly and my child has to be withdrawn from school prior to the end of a school year, I agree to pay the balance of the outstanding tuition in full one month prior to my child's last day at the school. I further understand that the fee structure will be as follows:

To accompany application	- non refundable registration fee	\$ 150.00
	- non refundable tuition fee for June 20__	\$ _____
	- Parents' Guild Membership Fee	\$ 25.00

Post dated cheques (dated on the first of each month) to cover the balance of the tuition should be presented to the school on or before \_\_\_\_\_.

\_\_\_\_\_  
Signature of parent or guardian

\_\_\_\_\_  
Date