

CABIN JOHN/BROOKMONT CHILDREN'S PROGRAM, INC.

4000 Virginia Place ~ Bethesda, MD 20816
(301) 320- 6780 ~ www.brookmontkids.org

TUITION AGREEMENT

Parents wishing to enroll their child in the Cabin John/Brookmont Children's Program shall pay a monthly tuition for enrollment in the amount set by the Board of Directors. A tuition deposit for the last month and a half of school is due within fifteen (15) days after notification of acceptance into school. (Once the deposit is made, special circumstances, such as relocation of parents, etc. may be brought before the Board of Directors. After July 1, the deposit is non-refundable regardless of circumstances).

Tuition is due by the first of each month for the upcoming month. Parents shall pay their monthly tuition fee regardless of the absence of a child because of illness, vacation, or other reason, unless special arrangements have been made in advance with the Board of Directors. If parents fall behind in payments in the amount of one month's tuition, the Directors have the right to suspend the parent's child from school until tuition is current.

The Cabin John/Brookmont Children's Program admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, or national or ethnic origin in administration of its admissions policies, educational policies, scholarships, and loan programs. Tuition assistance may be available on a case by case basis based on enrollment numbers and financial needs. If interested in being considered for financial aid, please indicate below to receive additional information.

If a parent withdraws a child at any time between September and June, four weeks written notice is required. Failure to comply with this regulation will result in forfeiture of the tuition deposit and full tuition for the final month of attendance. With advance notice, the final tuition will be pro-rated according to the amount of time actually spent by the student in the program.

The parent/legal guardian has a right of privacy with respect to all information concerning the student maintained in the school. This information is accessible to the parent/legal guardian and copies are available to the parent/legal guardian upon request.

I UNDERSTAND AND ACCEPT THE ABOVE PROVISIONS.

NAME (print): _____
Parent/Guardian

SIGNATURE: _____ **DATE** _____

I am interested in receiving information for possible tuition assistance. Yes _____ No _____