



RESERVATION FAMILY PAYMENT CONTRACT

I understand that in order to reserve my child's enrollment space at Elaine Rosi Academy for Children, I am required to submit payment in the amount of \$200 each month until the month of the agreed upon start date.

Payment is due on the 1st of each month. If I miss a payment, or payment is not received by the 30th of the month the payment was due, I will forfeit my space and must re-enroll.

All monthly payments will be put toward my child's required two-week deposit, which is applied to the last two weeks of care. If the amount collected exceeds the two-week deposit amount, the overage will be put toward tuition.

If I choose, at any time, not to start at Elaine Rosi Academy as planned, I forfeit the right to all monies paid.

I agree to notify Elaine Rosi Academy immediately if I am withdrawing my enrollment.

Signed: _____ Date _____

Parent signature

Print Name: _____

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Visit our website at www.rosiacademy.com/Brentwood