



RE-ENROLLMENT

RE-ENROLLMENT FOR ACADEMIC YEAR 2024 - 2025

Dear Parents,

This is the time of year when we start planning ahead for the new academic year. In order to assist our planning, we need to know if your child will be returning.

Kindly fill out the attached re-enrollment form and submit it to school by January 26, 2024.

Be aware that if the forms are not returned by the deadline we will assume that your child will not be returning.

TUITION INFORMATION

Half Day 9:00am - 3:30pm \$18,150 Yearly / \$6,050 Quarterly

Full Day 9:00am - 5:00pm \$19,800 Yearly / \$6,600 Quarterly

* Tuition must be paid quarterly on September 1st, December 1st and March 1st.

Note: Consistent with our philosophy of keeping families together, we will consider sibling applications with priority BUT ONLY WITH REGARD TO THE ONGOING NEEDS OF THE SCHOOL TO BALANCE THE POPULATION. NO SIBLING APPLICATIONS SHOULD BE CONSIDERED AS A GUARANTEE OF AUTOMATIC OR EVEN EVENTUAL ACCEPTANCE, but rather as an application that carries with it a priority status. The term "sibling application" refers to brothers and sisters of children CURRENTLY enrolled in the school.

_____ will be returning to school as of

- Summer Session 2024 (July 8 - August 2, 2024)
- September 3, 2024

We, the parents of _____ agree to pay quarterly on the 1st day of the months September, December and March.

- Half day \$6,065 quarterly (9:00am - 2:30pm)
- Full day \$6,600 quarterly (9:00am - 5:00pm)

- Summer Session \$2,000 (9:00am - 5:00pm)

Enclosed is the \$100.00 non-refundable registration fee for academic year 2024- 2025.

I understand that no refund or cancellation of the yearly fees will be made by the school for absence, withdrawal or dismissal before the end of the school academic year September to June and herewith agree to assume full responsibility for the full annual fees.

* Deposits are not refundable under any circumstances.

Signature of parent or guardian

Date

Name of the Returning Child _____