



Older 2's - Preschool Financial Agreement 2025-2026

Student Name: _____ Date of Birth: _____ Age by Sept. 30: _____

_____(Initial) **Registration Fee:** \$150--Due at time of registration, non-refundable (\$75 for Active-Duty Military)

Monthly Tuition Rates

• **Older PreK2-Hybrid PreK3** (~~2 by December 31, 2024~~, or 3 by September 30, 2025 and not fully, 100% potty trained)

Select 1 option

____ 6:30am-5:30pm - \$1249 **(\$12,490 –10 Month School Year Total)

____ 8:30am-5:30pm - \$1173 **(\$11,730 –10 Month School Year Total)

• **PreK3-PreK4** (3 or 4 by September 30, 2025, and fully, 100% potty trained)

Select 1 option

____ 6:30am-5:30pm - \$1128 **(\$11,280 –10 Month School Year Total)

____ 6:30am-3:30pm - \$1004 **(\$10,040 –10 Month School Year Total)

____ 8:30am-5:30pm - \$988 **(\$9,880 –10 Month School Year Total)

____ 8:30am-3:30pm - \$840 **(\$8,400 –10 Month School Year Total)

____ 6:30am-1:00pm - \$807 **(\$8,070 –10 Month School Year Total)

____ 8:30am-1:00pm - \$608 **(\$6,080 –10 Month School Year Total)

Additional Charges (one time charge)

_____(Initial) • **Activity Fee – Due August 15th**

~~Older PreK2-PreK3 - \$100~~

PreK4 - \$150

_____(Initial) • **Curriculum Fee – Due July 1st**

~~Older PreK2 - \$100~~

PreK3 - \$125

PreK4 - \$150

_____(Initial) • **Cap and Gown Fee – Due January 15th**

PreK4 - \$25

Tuition Payment:

- Tuition payments are due on the 15th of each month.
- **Preschool tuition is charged in 10 monthly payments. (August 15th-May 15th)

Other Fees:

- Late Payment (past the 20th of the month) - \$35
- Return Item/Payment Fee (per return) - \$50
- Late Arrival Charge after 9:30am - \$20
- After 5:30pm closing Late Pick Up, Emergency Closure Late Pick Up, Behavior, and Sick Call Late Pick Up - \$15 after the first 10 minutes, \$1 every additional minute

Discounts:

- Sibling Discount: 5% off each additional child if enrolled full time **OR**
- **A 7% discount is offered if the school year's tuition is paid by the 1st day of attendance.

This agreement summarizes the procedures of Oak & Lily Academy, the services to be provided, and the fees which will be charged for these services. By signing this agreement, the parents/guardians indicate their understanding of, and agreement with, Oak & Lily Academy's policies. The registration fee is due at the time of registration and is non-refundable. These policies are non-negotiable.

Parent/Guardian Signature _____



Student Information

Name of Child: _____ Nickname: _____

Age by Sept. 30th: _____ Date of Birth: _____ (circle) Male Female

Shirt Size (circle) 2T 3T 4T YXS YS YM YL YXL

Street Address: _____

City: _____ State: _____ Zip Code: _____

Father's Name _____ Cell No. _____

Email _____ Cell Phone Carrier _____

Employer _____ Work No. _____

Mother's Name _____ Cell No. _____

Email _____ Cell Phone Carrier _____

Employer _____ Work No. _____

Child Lives With: _____

Other Children in family (names & ages): _____

Previous School or Centers: _____

Allergies and/or medical conditions: _____

Emergency Contacts and Authorized Pick-Up Persons: (Other than parents, must be over the age of 18.)

Name

Phone Number

Persons NOT allowed to pick up child: (court or legal documents stating so are required)

With my signature, I certify that all the information provided on this form is true and updated to the best of my knowledge and that I am the true legal guardian of the above. I agree not to hold Oak & Lily Academy or any of its representatives or employees at fault should my child be injured in any manner whatsoever. I give Oak & Lily Academy permission to take whatever action required in an emergency.

Parent/Guardian Signature

Date

PERMISSION TO USE IMAGE

Oak & Lily Academy uses student pictures on our Facebook page and our website. The images are used to show parents, friends, and family the activities we are participating in daily. At no time is a child singled out or identified by name. The images are not used for anything outside of the above-mentioned pages.

Please sign below acknowledging your notification of the use of image for the Facebook page and the Oak & Lily Academy website.

Student Name _____

Parent/Guardian Signature _____

PERMISSION TO TEXT

____ (Initial) I/We hereby give permission to Oak & Lily Academy to send pertinent text message (Weather, Emergency Updates) concerning the student listed below.

MILITARY STATEMENT

____ (Initial) I certify that I am Active-Duty Military serving in the _____
(Branch of Service), and I am the legal parent/guardian of _____
(Student's Name).

ACKNOWLEDGMENT TO PROCEDURES AND POLICIES

I acknowledge that I have read and agree to the terms with the following policies:

- _____ (Initial) OLA Parent Handbook
- _____ (Initial) OLA Sick Policy
- _____ (Initial) OLA Discipline Policy (age group specific)
- _____ (Initial) OLA Potty-Training Policy (age group specific)

These documents can be found on the Oak & Lily Academy website at www.oakandlilyacademy.org under Admissions and in OLA's front lobby in a binder at any time.

I understand that to enroll my child at OLA I need to turn in the following documents and that my child's spot will not be secured, and my child cannot attend until OLA has received these items:

- _____ (Initial) This registration packet
- _____ (Initial) A completed Tuition Express Form
- _____ (Initial) The non-refundable Registration Fee
- _____ (Initial) A completed School Entrance Health Form (including current immunization record signed by a physician)
- _____ (Initial) A copy of your child's birth certificate

Parent/Guardian Signature

Date

Donna Davis

Director Signature

Automated Payment Processing



Safe. Convenient. Easy.

We are excited to offer the safety, convenience and ease of Tuition Express®—a payment processing system that allows secure, on-time tuition and fee payments to be made from either your bank account or credit card.

ELECTRONIC FUNDS TRANSFER AUTHORIZATION FOR BANK ACCOUNT AND CREDIT CARD

I (we) hereby authorize (business name) OAK AND LILY ACADEMY to initiate credit card charges to the below-referenced credit card account (Section A) OR, initiate debit entries to my (our) checking or savings account, indicated below (Section B). To properly affect the cancellation of this agreement, I (we) are required to give 10 days written notice. Credit union members: please contact your credit union to verify account and routing numbers for automatic payments.

We accept Visa, Mastercard, Discover and American Express. All cards will be charged a 3% convenience fee per transaction. ***We **DO NOT** accept Cashapp cards or Cashapp checking accounts.

COMPLETE ONLY ONE SECTION BELOW

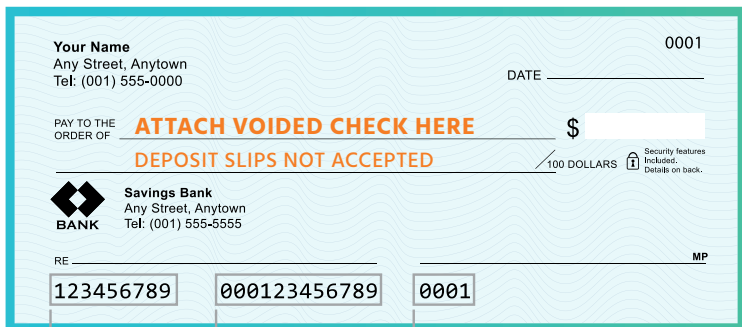
SECTION A (Credit Card) **All cards have a 3% convenience fee per transaction.

Cardholder Name	Phone #		
Cardholder Address	City	State	Zip
Account Number	Expiration Date	CVV Code	
Cardholder Signature	Date		

-OR-

SECTION B (Bank Account) **No additional fees.

Your Name	Phone #			
Address	City	State	Zip	
Bank or Credit Union Name	Bank or Credit Union Address	City	State	Zip
Routing Transit Number (see sample below)	Account Number (see sample below)	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	
Authorized Signature	Date			



ROUTING NUMBER

ACCOUNT NUMBER

CHECK NUMBER

FOR OFFICIAL USE ONLY

Date Received

Employee Signature

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