NEIGHBORHOOD ASSEMBLY OF GOD
NEIGHBORHOOD CHRISTIAN LEARNING CENTER
815 IRVING ROAD EUGENE OR 97404
541-688-4121
NAGDC@COMCAST.NET

We have registered our child _____(print name).

Please circle the enrollment status you are enrolling your child for.

AGE	97-160 Hours	41-96 Hours	40 OR Less Hours
INFANTS: 6 WKS - WALKING	**$924.00**	**$564.00**	**NA**
TODDLERS: WALKING – 30 MONTHS	**$873.00**	**$533.00**	**NA**
OVER 30 MONTHS: 2.5 TO 5 YEARS	**$708.00**	**$435.00**	**$192.00**
LATCHKEY: KINDER – 12 YEARS Summer & Kindergarten	**$614.00**	**$378.00**	**$168.00**
LATCHKEY: KINDER – 12 years School session Sept - June	**31-60 Hours**	**16-30 Hours**	**15 or less Hours**
	$271.00	**$152.00**	**$81.00**

_____ (Please initial) I understand that my payment of $ _____ is due and payable by the 5th of the attending month. Checks returned NSF closed account, or returned by the bank for any reason you will be charged a fee of $25.00.

_____ (Please initial) I understand that a $25.00 late fee will be charged on the 6th of the attending month if payment has not been received. If full payment, including any late fees has not been received by the 25th of the attending month my child cannot attend NCLC until all tuition is current.

_____ (Please initial) I understand that a $50 registration fee is non-refundable and is due with my child's enrollment forms. I will be charged $1.00 for every minute, per child, past 6 PM until the child is picked up.

_____ (Please initial) I understand that if I choose to change my child's attendance schedule I must contact the daycare director, and new schedule must be approved.

_____ (Please initial) Due to fixed costs averaged over a calendar year, there is no reduction in tuition. No tuition rebate is given for sick days, family vacation time or days that NCLC is closed for holidays, bad weather or circumstances beyond our control. Our overhead does not change when these events occur.

_____ _____ _____

Printed Name Signature Date