

Door of Hope Freedom Center-School Year Contract 2020-2021 (Aug.26 -May 28)

Child's Name		Allergies	Age	Birthdate	Sex () M () F
Father's Name / Social Security #		Home Address		Home Phone	
Place of Employment	Work Hours	Business Address		Business Phone	
Mother's Name / Social Security #		Home Address		Home Phone	
Place of Employment	Work Hours	Business Address		Business Phone	
Person or Persons authorized to pick up Child (Name, Address, Phone #, and Relationship to Child)					
Person or Persons to contact in emergency should both parents be unavailable (Name, Phone #, and Relationship to Child)					

How did you find out about Door of Hope Freedom Center? _____

Beginning Date _____

Name of School _____

1. Mark Days M T W TH F

Weekly Payment Contract

Weekly Tuition Plus Transportation and Snack \$65

Extra \$15.00 per day School Vacation/Holidays

Annual Registration Fee of \$50.00 per child to be paid on or before the child's first day.

Tuition is due in full the first Business day of each month. You are required to pay one month in advance.

Parents or Legal Guardian Signature & Date

Parents or Legal Guardian Signature & Date

Teacher or Director Signature and Date