

**Little Explorers of Newtown  
7 Berkshire Road  
Sandy Hook, CT 06482**

**TUITION CONTRACT**

Name of child \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Child's Birthdate \_\_\_\_\_

This is an agreement between Little explorers of Newtown and  
\_\_\_\_\_(parents), regarding the care of  
\_\_\_\_\_(child). Your child is enrolled in the \_\_\_\_\_

program and will attend the Center the following days of the week:

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_

from the hours of \_\_\_\_\_ to \_\_\_\_\_.

The tuition for the care will be \_\_\_\_\_ and is due in advance each week for the  
Following week and will be made for the next week on the last day of the week the child  
Is in our care. The tuition will be paid \_\_\_\_ weekly, \_\_\_\_bi weekly, or \_\_\_\_ monthly.

To confirm enrollment, please sign, date and return this form to the above address as  
Soon as possible with a check in the amount of \$200 which covers our nonrefundable  
Registration fee.

Signed (parent) \_\_\_\_\_ Date \_\_\_\_\_

Signed (parent) \_\_\_\_\_ Date \_\_\_\_\_

Signed (director) \_\_\_\_\_ Date \_\_\_\_\_

A copy of this contract will be signed by the Director and returned to you as confirmation  
of your enrollment.

Start Date \_\_\_\_\_