



West Charleston Enrichment Academy

1. Registration and tuition are non-refundable.
2. Monthly tuition is due in advance or on the first day of the month. There will be a \$50.00 late fee for payments not received on or by the 5th. No student will be allowed to attend after the 10th of the month if tuition has not been paid.
3. There is no deduction for absences, illness, or holidays. Regular fees, as per contract, will be charged.
4. Children may arrive 15 minutes before class and leave up to 15 minutes after class. Childcare fees will be charged for children arriving early or staying later than 15 minutes.
5. A \$30.00 fee is charged on all returned checks. After two returned checks, all fees will be on a cash only basis.
6. Children remaining past the closing time of 5:30 PM will be charged \$1.00 per minute.
7. There is a 10% discount on full yearly tuition and child care fees paid in advance by April 30, 2022. There is a 5% discount on full yearly tuition and child care fees paid in advance by August 8, 2022.
8. Siblings receive a 10% discount on tuition.
9. A child is considered officially enrolled when we have a signed contract, a completed registration card, shot record, field trip permit, birth certificate and records request.
10. All parents of WCEA students are expected to participate in PTO fundraisers.

PARENT/GUARDIAN ACKNOWLEDGMENT

I have read and understand the conditions listed above and hereby agree to obligate myself to this agreement. I have also received the Parent Handbook.

Parent/Guardian Signature

Date



West Charleston Enrichment Academy

STUDENT INFORMATION

Name that student will use at school

Medical needs and special conditions (Include explanation of any medical conditions/allergies affecting your child that the school should be aware of)

Student's Address City State Zip

Telephone Number

PARENT/GUARDIAN INFORMATION (Please list persons responsible for student.)

MOTHER

Last Name First Middle

Relationship Home Phone Pager or Cell

Home Address City State Zip

Occupation Employer Name Work Telephone

FATHER

Last Name First Middle

Relationship Home Phone Pager or Cell

Home Address City State Zip

Occupation Employer Name Work Telephone

GUARDIAN

Last Name First Middle

Relationship Home Phone Pager or Cell

Home Address City State Zip

Occupation Employer Name Work Telephone

RESPONSIBLE PAYMENT INFORMATION

Last name of person responsible for tuition payment First Middle Social Security Number

Street Address City State Zip Code/Phone Number