

Growing Tree School

334 Somerset St.

North Plainfield, New Jersey 07060

908-754-5505

Tuition Schedule & Payment Policies 2023

Monthly Tuition	Half Day		Full Day 9-3:00	Extended Day 1 7-5:30	Extended Day 2 7-6:00
	9:00	11:30			
2 days	160.00		285.00	423.00	445.00
3 days	230.00		425.00	576.00	615.00
4 days	295.00		560.00	749.00	790.00
5 days	345.00		599.00	836.00	872.00

Registration fee (each child, non-refundable): \$60

Family Discount:

Deduct 10% of lesser tuition for each additional child.

Late Pickup: With notification: \$10 for each 15 minutes or part thereof.
Without notification: \$15 for each 15 minutes or part thereof.
After 6:00 with notification: \$20 for each 10 minutes or part thereof.
After 6:00 without notification: \$30 for each 10 minutes or part thereof.

To Enroll

1. Visit **Growing Tree** and complete an admission application.
2. A non-refundable registration fee. First month payment is due before the first day of attendance.

Payment Policies

1. Payments are due the first of the month. Payments after the 7th of the month are assessed a \$15 late fee.
2. Returned checks are assessed a \$30 service charge.
3. Any collection, legal fees and expenses incurred by **Growing Tree** to collect delinquent accounts are the responsibility of the parent(s) or legal guardian, plus interest of 1.5% per month and late fees defined in this policy. Late fees applied at \$15 per month after the 7th of the month due; and reassessed at \$15 on the 7th day of each month thereafter until account is fulfilled.

Please be sure to retain a copy of this fee and policy schedule
Effective: January 1, 2023

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Registration Form

Also visit us at www.thegrowingtreepreschool.net



Child's Name:	Birth Date:	Phone Home/Cell:
Address:	Town:	Zip Code:

Family

Mother's Name:	Father's Name:
Cell Phone:	Cell Phone:
Cell Carrier:	Cell Carrier:
Occupation:	Occupation:
Job Phone:	Job Phone:
E-mail:	E-mail:
Marital Status:	Court-Ordered Restrictions? (If yes, attach applicable documents)
Brother/Sisters (Names and Ages):	

Emergency: Local contact if parents are unavailable

Name:	Relationship:
Address:	Phone:

Fears, habits, physical limitations _____

Allergies, Special Diets, Medications, Special Needs, IEP Information (if any) etc. _____

Alternate Pickup We authorize the following individual(s) to pick up our child

Name 1:	Relationship:
Address:	Phone:
Name 2:	Relationship:
Address:	Phone:
Name 3:	Relationship:
Address:	Phone:

Please read the following carefully before signing:

- I understand the terms and conditions regarding tuition and fees and have received a copy for my records.
- In the event of a medical emergency when I cannot be reached, **Growing Tree Preschool** is authorized to seek emergency medical care. Dr. _____ Phone: _____
- I have received the "Information to Parents" statement & Growing Tree Guide with policies on release of children, expulsion, and management of illness/communicable diseases.

Parent / legal guardian signature _____ Date _____

(Office Complete: Parent/Child interview date _____)