

# Growing Tree School

334 Somerset St.  
North Plainfield, New Jersey 07060  
908-754-5505

## Tuition Schedule & Payment Policies 2024

Monthly Tuition	Half Day	Full Day	Extended Day 1	Extended Day 2
	9:00 11:30	9-3:00	7-5:30	7-6:00
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 fees. 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, 2024**

# Growing Tree School

334 Somerset St.  
North Plainfield, NJ 07060 908-754-5505

## Registration Form

Also visit us at [www.thegrowingtreepreschool.net](http://www.thegrowingtreepreschool.net)



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

### Family

<b>Mother's Name:</b>	<b>Father's Name:</b>
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 \_\_\_\_\_ )