

The Children's Discovery Center

CONTRACT OF DEPOSIT

In order to secure a position on the Waiting List for enrollment in the Children's Discovery Center or The Discovery School, I understand that I must put down a deposit of 1/2 of my child's expected tuition, and I must choose an enrollment deadline for my child. This date is based on my preferred date of enrollment and the director's prediction of possible openings in the school. I understand that the directors of the Children's Discovery Center will predict to the best of their knowledge the earliest possibility of enrollment for my child, but that **this estimation will in no way be a guaranteed date of enrollment.**

1. **During** the waiting period: I understand that I must remain on the waiting list until my **enrollment deadline** arrives. If a space for my child becomes available by the deadline I have chosen and I choose not to enroll, I understand that I will forfeit the entire deposit. **(The deposit is non-refundable if you withdraw your child from the waiting list!)** You may choose to **delay** starting, but again, the deposit is **not refundable.**
2. **If there is no space** upon the arrival of my deadline: I may ask for a full refund of my deposit, **only if Children's Discovery Center is not able to enroll my child by my enrollment deadline** and I do not want to continue to be on the waiting list. (You may choose to remain on the waiting list for the next available opening with no penalty.)
3. Upon **starting my child** at the center: **After my child starts attending the school,** one half of the enrollment deposit will be converted to a registration fee, which is non-refundable. (In order to receive a refund of the other half of the deposit, you must provide the director with 30 days written notice of termination of your child's enrollment.) Refunds will be mailed within 30 days after my child's last day of enrollment. I understand that my child's tuition must be current to receive any refund.

Child's Name _____ Date of Birth _____

Amount of Deposit (1/2 of monthly rate for the schedule selected) _____

Enrollment Deadline (see above for refund restrictions) _____

Anticipated Schedule (Full Time, 3 mornings, 2 afternoons, etc...) _____

(CIRCLE) Mother/Father's name _____

Mother/Father's work number/cell numbers _____

Spouse/Partner's name _____

Spouse/Partner's work number/cell numbers _____

Home phone number _____

Home address _____

Parent's Signature _____ Date _____