



## PARENT TUITION AGREEMENT

\_\_\_\_\_ I agree to pay the amount of \$\_\_\_\_\_ per week for childcare tuition and/or co-payment under the Division of Family Services. (Note: Hilltop charges a center fee of \$20/week for our subsidy families on top of your sliding scale to offset the cost of childcare.)

\_\_\_\_\_ I understand that the total tuition is due by Friday morning of each week and that no deductions are made for absences, sick days, holidays or inclement weather days.

\_\_\_\_\_ I agree to have all childcare fees for the current month will be paid in full by the last business day of the month. Any changes must be approved by the center Director.

\_\_\_\_\_ I understand that a two-week notice of vacation and a \$30.00 per week holding fee are required to maintain my child's slot during this time period.

\_\_\_\_\_ I further understand that termination is inevitable if conditions of this policy are not followed and that re-enrollment following termination will depend on space available and payment of outstanding fees. A new registration fee is required upon re-entry.

Weekly Tuition:

\$\_\_\_\_\_ /week

DFS Co-Pay Fee Per Day: \$ \_\_\_\_\_

Hilltop's Co-Pay Fee: \$ \_\_\_\_\_

Total Weekly Tuition: \$ \_\_\_\_\_

### OFFICE USE ONLY

WEEKLY TUITION: \$ \_\_\_\_\_

BI-WEEKLY TUITION: \$ \_\_\_\_\_

MONTHLY TUITION: \$ \_\_\_\_\_

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director Signature

\_\_\_\_\_  
Date

**ALL FEES MUST BE PAID BY ONLINE, CREDIT/DEBIT CARD, CHECK,  
CASHIER'S CHECK, MONEY ORDER OR CASH.**