



# Fayette Cooperating Nursery School and Kindergarten

109 Rosemont Garden • Lexington, KY 40503 • 859.276.6350 3564A Clays Mill Road • Lexington, KY 40503 • 859.223.1713

## Tuition Payment Agreement

A tuition deposit equal to one month's tuition (or 1/9 of the total tuition) is collected upon registration. This deposit is applied to the child's last month's payment, due May 2009. Parents will have 3 choices for paying the balance of the tuition: paying annually, semi-annually or monthly. Please read the following choices and select the one which works best for your family. If you have any questions, please call 276-6350.

I understand the tuition payment options described below. I plan to pay the balance of my child(ren)'s tuition as follows:

\_\_\_\_\_ **Annual Payment**-- I will pay the balance of tuition in full on or before August 15, 2008. I understand that I will receive a \$45 discount on the year's tuition.

\_\_\_\_\_ **Semi-annual Payments**-- I will pay the balance of tuition in 2 equal payments, with the first half of the tuition due on August 15, 2008 and the second half of the tuition due on January 10, 2009. I understand that I will receive a \$40 discount on the total tuition, or \$20 off of each payment.

\_\_\_\_\_ **Monthly Payments**—I will pay the balance of tuition in 8 equal payments. I understand that families who choose this monthly payment option are required to participate in the Automated Tuition Payment Service. I understand that monthly payments will be automatically withdrawn from my account on the 5<sup>th</sup> day of each month (or the following business day) beginning in September 2008 and ending in April 2009. I hereby authorize my financial institution to make these monthly payments from the account below according to the terms described herein. I further agree to notify the Fayette Cooperating Nursery School and Kindergarten ten days prior to a scheduled payment if this account information changes. Returned payments will be charged a \$10 fee.

Please use the following account:

Name of Financial Institution: \_\_\_\_\_

\_\_\_\_ Checking Account

\_\_\_\_ Savings Account

\*\*\*Attach a voided check here.\*\*\*

Signed: \_\_\_\_\_

Date: \_\_\_\_\_