

little Learning Academy  
 832 Park Avenue | Collingswood, NJ 08108 | 856-559-0199  
**TUITION CONTRACT and REGISTRATION FORM**  
**2023-2024 School Year**

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_  
 \_\_\_\_\_

Parent 1 Name: \_\_\_\_\_ Parent 1 Work No: \_\_\_\_\_

Cell Number (1): \_\_\_\_\_ Cell Provider/Carrier: \_\_\_\_\_

Parent 1 Email: \_\_\_\_\_

Parent 2 Name: \_\_\_\_\_ Parent 2 Work No: \_\_\_\_\_

Cell Number (2): \_\_\_\_\_ Cell Provider/Carrier: \_\_\_\_\_

Parent 2 Email: \_\_\_\_\_

IF ANY DETAILS ABOVE DIFFER FROM INFO PREVIOUSLY PROVIDED TO LLA, PLEASE CHECK HERE.

**Child's Schedule:** Please designate drop off and pick up times below and select requested days. We will do our very best to accommodate requests for specific days and will be in touch with options should alternate days be absolutely necessary based on teacher/student ratios and enrollment requirements.

\*12:15pm pick up time is for half-day students only.

DROP OFF	7:25	7:30	7:35	7:40	7:50	8:00	8:10	8:20	8:30	8:40	8:50	9:00
Monday												
Tuesday												
Wednesday												
Thursday												
Friday												

PICK UP	*12:15	3:30	4:00	4:10	4:20	4:30	4:40	4:50	5:00	5:10	5:20	5:30	5:40	5:50	5:55
Monday															
Tuesday															
Wednesday															
Thursday															
Friday															

**Registration Fees and Documents: A non-refundable \$150 registration fee is due by May 26, 2023. A completed Tuition Contract is required.** LLA will provide a complete Parent Handbook including policies and requirements for signature. Prior to a child's start date, a Universal Health Record, up to date immunizations and all parent forms are required.

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**About Tuition, Vacations, and Special Discounts:** LLA invoices monthly to make budgeting easy! In short, regardless if there is a 4 week or a 5 week month, your invoicing stays the same. We also automatically allow and discount every student ONE FREE VACATION WEEK every year by determining the rate based on 51 weeks instead of 52. Additionally, a 10% sibling discount is available and is given on lower amount of tuition for oldest child.

**Full Day Learning Program:** Hours of Operation: 7:30am-6:00pm, Monday - Friday

5 full days      \$1099 per month  
4 full days      \$1059 per month  
3 full days      \$1036 per month

**Half Day Learning Program:** Hours of Operation: 7:30am-12:15pm, Monday - Friday

5 half days      \$872 per month  
4 half days      \$803 per month  
3 half days      \$745 per month

**Add-on days (subject to availability): \$59 full day, \$43 half-day will be added to your monthly tuition.**

**Tuition Invoicing:** Tuition is due monthly on the first day of the month or bi-monthly on the first and fifteenth of the month. Tuition is due regardless of holidays, sick days, and planned or unplanned absences. Monthly bills are provided via email. Auto-payment is also offered.

**About Late Tuition Fees:** Your account is considered late after 5 days past due and late charges will be added in the following manner: \$25.00 after 5 days, \$50.00 after 7 days, and \$75.00 after 9 days. If your account is 10 days late, it will result in termination of enrollment. There are NO EXCEPTIONS.

**About Late Pick Up Fees:** LLA closes at 6pm. If you are unable to pick up on time, YOU MUST NOTIFY US. A late pick-up charge of \$25.00 per fifteen minutes, per child, will be added to your account. For example, if pick up occurs 6:00-6:15pm, a \$25 fee is applied. If pick up occurs 6:16-6:30pm, a \$50.00 fee and so on.

**FOR COMPLETE DETAILS ABOUT OUR POLICIES, PLEASE SEE THE PARENT HANDBOOK AT [WWW.LITTLELEARNINGACADEMY.COM/FORMS](http://WWW.LITTLELEARNINGACADEMY.COM/FORMS).**

**FOR PARENTS:**

By signing below, I indicate I have read and agree to Tuition Details as outlined, including rates and late fees. I agree to pay any and all balances due on a (please circle one) monthly bi-monthly basis.

CHILD'S NAME: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_

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

Office Use Only

REGISTRATION	DATE	CHECK OR CASH	INITIALS