CASTLE KIDS Early Learning Center

2023-2024 CrackerJack Class Financial Account Worksheet

Person Responsible for the Account



Name (please print)		Name
Signature		Name
Address		Name
City	Zip Code	Parent/Guardian if different from person responsible for
E-mail		payments:
Home #	Work #	
Identify your relationship w/student as the account holder: [] Parent [] Guardian [] Grandparent [] Other		Please make checks payable to: Beth Eden Baptist School

	uition Rates - 5 o	lay		#	Amount
All Day	7:30 – 5:00	5 day	\$875		
Full Day	8:15 – 3:15	5 day	\$805		
Half Day	8:15 – 11:45	5 day	\$515		
	#				
All Day	7:30 – 5:00	4 day	\$760		
Full Day	8:15 – 3:15	4 day	\$690		
Half day	8:15 – 11:45	4 day	\$460		
	#				
All Day	7:30 – 5:00	3 day	\$655		
Full Day	8:15 – 3:15	3 day	\$550		
Half Day	8:15 – 11:45	3 day	\$390		
	#				
All Day	7:30 – 5:00	2 day	\$500		
Full Day	8:15 – 3:15	2 day	\$390		
Half Day	8:15 – 11:45	2 day	\$300		
		Total	Tuition P	er Month	
	Standard Fees			#	Amount
Enrollment Fee			\$150		
Materials			\$125		
Cot Fee			\$45		
Total Standard Fees					

Preschool Care (billed after services provided)						
		Day				
Early Care	7:30 – 8:00	\$10				
Late Care	3:30 – 5:00	\$10				