

**Fall Enrollment Contract**

I hereby enroll my child, \_\_\_\_\_ at the Annapolis Park Child Development Center. My child's admission date is \_\_\_\_\_.

***Weekly Tuition Rates***

**Preschool Student:** 2 1/2 & 3 year old - \$170      **Part Time \$140 (3Days)**  
4 & 5 year old - \$160

**Drop In Daily Rate: \$45 (Must be drop In, may not exceed 2 days)**

**School Age Student:** weekly – AM or PM \$55    AM & PM \$75  
Half Day enrolled student add \$10 to weekly rate  
Whole Day enrolled student add \$20 to weekly rate

**Drop In                      Full Daily -\$ 30 (Must be drop in, may not exceed 2 days)**  
**Half Day -\$ 20**

**My Child's Weekly Tuition Rate:** \_\_\_\_\_.

**My child will attend Weekly:**  
Monday - Friday \_\_\_\_\_ to \_\_\_\_\_

**My child will attend Daily/Hourly:**  
Monday            \_\_\_\_\_ to \_\_\_\_\_  
Tuesday           \_\_\_\_\_ to \_\_\_\_\_  
Wednesday       \_\_\_\_\_ to \_\_\_\_\_  
Thursday          \_\_\_\_\_ to \_\_\_\_\_  
Friday              \_\_\_\_\_ to \_\_\_\_\_

I realize that I must pay an annual nonrefundable registration fee of \$50.00. I realize that delinquent tuition payment may be subject to termination from Annapolis Park Child Development Center immediately.

**Parent Certification**

I certify that I have read, understand, and will abide by The Annapolis Park Child Development Center's program and policy. I agree to the financial terms and conditions indicated in the Policy Handbook. I am aware that I am under obligation to notify the director two weeks before withdrawing my child in writing and am required to pay full tuition for those two weeks. I certify that I have read the entire Policy Handbook.

Parent/Guardian Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

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

Cicero Mungo, AP Elder  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Annapolis Park Child Development Center**  
*“Inspiring Learning, Laughter & Love in the Name of the Lord”*

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**Enrollment Contract – DHS Students**

I hereby enroll my child, \_\_\_\_\_ at the Annapolis Park Child Development Center.

My child’s admission date is \_\_\_\_\_.

My child is: \_\_\_\_\_ Preschool Student  
                  \_\_\_\_\_ School Age Student

**Weekly Co-Pay:** \$ \_\_\_\_\_

**My child will attend:**

Monday        \_\_\_\_\_ to \_\_\_\_\_  
Tuesday      \_\_\_\_\_ to \_\_\_\_\_  
Wednesday   \_\_\_\_\_ to \_\_\_\_\_  
Thursday     \_\_\_\_\_ to \_\_\_\_\_  
Friday        \_\_\_\_\_ to \_\_\_\_\_      Total hours weekly \_\_\_\_\_

I realize that I must pay an annual nonrefundable registration fee of \$50.00. I realize that delinquent tuition payment of two weeks may be subject to termination from Annapolis Park Child Development Center.

**Parent Certification**

I certify that I have read, understand, and will abide by The Annapolis Park Child Development Center’s program and policy. I agree to the financial terms and conditions indicated in the Policy Handbook. I am aware that I am under obligation to notify the director two weeks before withdrawing my child in writing and am required to pay full tuition for those two weeks. I certify that I have read the entire Policy Handbook.

Parent/Guardian Signature: \_\_\_\_\_

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

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

Cicero Mungo, AP Elder

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

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