

In the name of The Most Beneficent, The Most Merciful

Al-Huda Pre-School

2017-2018

Tuition Plan & Schedule

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Tuition Policy

Most pre-schools/child care centers require bi-weekly tuition payments, as Al-Huda Pre-School requires. In order to make the tuition collections process easier and timelier for both the parents and the Pre-School, we have adopted 2 tuition plans. These plans are designed to facilitate both payment and collection of Pre-School fees, fees that are vital to maintaining the level of quality and excellence Al-Huda Pre-School has dedicated itself towards. All Pre-School parents must choose one of the 2 plans before the child is accepted into the pre-school. Parents must complete the Financial Agreement Contract in Appendix a regardless of which plan is selected.

Payment Plans & Schedules

Plan A -- Post Dated Checks (All checks must indicate the address and telephone number.)

With this plan, parents can pay their school fees in regular bi-weekly installments by providing the school with postdated checks. The bi-weekly plan requires parents to provide the pre-school office with posted dated checks before the child is accepted into the pre-school. Parents may forfeit their child's reserved seat if they fail to provide the postdated checks to the Pre-School office within the designated time. **Checks must have the address and telephone number.** These checks must be postdated for every 2 weeks, beginning with the first Monday of attendance and ending with 05/28/18. Each check is equal to two weeks of tuition. The Pre-School will deposit each check on the day for which it is dated.

Plan C -- Charge Card (American Express, Discover, Master Card & VISA)

The Credit Card Charge plan is similar to the Automatic Direct Withdrawal Plan. The school will charge the credit card account provided by the parent. Parents must fill out the Credit Card Charge Authorization Form, along with the Financial Agreement (See Appendix C) and submit it to the pre-school office. All Credit Card information will remain confidential. Parents may forfeit their child's reserved seat if they fail to provide this information within the designated time. Under the bi-weekly plan, the Pre-School will charge the designated credit card for the bi-weekly tuition installment provided on the Credit Card Charge Authorization Form. Each charge will be made bi-weekly beginning with the first Monday of attendance and ending with 05/28/18.

Questions & Answers

1. *Can I switch plans during the school year?* Yes. Changes must be requested in writing and will not take effect until the two-week period following the request.
2. *What if I withdraw my child before 05/28/18?* **Two-week advance written notification** must be give before withdrawing your child. Once this notification is received all post-dated checks will be returned and card charge/automatic withdrawal payments will be cancelled.

Refund Policy

Application Fee: Non-refundable

Activity Fee

100% refundable if child withdraws before 1st day of school.
75% refundable if child withdraws by 3 PM on September 4, 2018.
0% refundable after first month of enrollment.

Al-Huda Pre-School

2017 – 2018 Fee Schedule

Application Fee (new students only) \$35 (non-refundable)

Pre-School Tuition

Toddlers	\$276 per week
Two year olds	\$225 per week
Three – Five year olds	\$216 per week
Part-Time (3-4 yrs old)	\$160 per week
Part-Time (under 3 yrs old)	\$180 per week

Yearly Pre-School Activity Fee (due by August 1st, 2016) \$150

Questions & Answers

1. *What if I still owe money to the school from last year or I have an outstanding balance this year?* **Any outstanding balances must be paid in full by August 18, 2017.**
2. *What are vouchers?* This is a program offered by the State of Maryland. It is based on income. The parent/guardian is responsible for any tuition not paid by the state, for any reason. You can contact the Maryland State Department of Education, Child Care Subsidy Branch at <http://www.earlychildhood.marylandpublicschools.org/child-care-providers/child-care-subsidy-program> for more information.

If you receive vouchers, have an outstanding balance from this year or last year, or any other special payment arrangements, please call the pre-school office **immediately** at 301-982-7135 and make an appointment to come in and complete the tuition agreement according to your circumstances.

Summary Checklist

1. Did you select a tuition plan and payment schedule? See Payment Plans & Schedules page 1.
2. For Plan A - Post Dated Checks, please provide the following to the pre-school office before the first Monday of attendance:
 - Financial Agreement Contract (**Appendix A**) filled out in its entirety.
 - Signed post-dated checks made payable to Al-Huda Inc.
3. For Plan C - - Charge Card (Visa, MC, AMEX & Discover), please provide the following to the Preschool office before the first Monday of attendance:
 - Financial Agreement Contract (**Appendix A**) filled out in its entirety.
 - Credit Card Charge Authorization Form (**Appendix C**) filled out in its entirety.
4. If your child is a new student enrolling at Al-Huda Pre-School, you must also provide your **child's Birth Certificate**, immunization records, health inventory, and any other required documents to the pre- school office along with your registration form.

Appendix A -- Financial Agreement Contract 2017-2018

The following contract is being established between Al-Huda Pre-School and _____ henceforth referred to as the Guardian (section B). The Guardian is fully responsible for paying the tuition for the following children (section A) who will be attending Al-Huda Pre-School during the 2017-2018 academic year.

SECTION A	First Child: _____ Class: _____ Second Child: _____ Class: _____ Third Child: _____ Class: _____
SECTION B	Guardian's Full Name, Address and Contact Information: Name: _____ Phone # (H) _____ (W) _____ Address: _____ Apt. #: _____ City: _____ State: _____ Zip: _____
SECTION C	Please check the box next to the plan and schedule that you wish to utilize to pay the tuition for the children listed in section A for the 2017-2018 academic year. Please check only one box. <input type="checkbox"/> Plan A - Post Dates Checks Bi-weekly Installments. Checks must have address and telephone number for the names on the checks <p style="text-align: center;"><i>Note: Checks must be dated with the following dates:</i> 8/21/17, 9/4/17, 9/18/17, 10/2/17, 10/16/17, 10/30/17, 11/13/17, 11/27/17, 12/11/17, 12/25/17, 1/08/18, 1/22/18, 2/5/18, 2/19/18, 3/05/18, 3/19/18, 4/02/18, 4/16/18, 4/30/18, 5/14/18, 5/28/18</p> <input type="checkbox"/> Plan C - Credit Card Charge Bi-weekly Installments * FACILITY IMPROVEMENT DONATION: <input type="checkbox"/> \$50.00 <input type="checkbox"/> \$100.00 <input type="checkbox"/> other: _____

I, _____ (Guardian) understand that;

- The sum total tuition fee that I am expected to pay for the children listed in section A for the remaining 2017-2018 academic year is \$_____.
- I have read and understand the rules contained in the Payment Plans & Schedules section of Al-Huda Pre-School's "2017-2018 Tuition Plan & Schedule" associated with the plan and schedule that I have selected in section C.
- Failure to maintain the payment plan and schedule that I have selected in section C will be a valid and sufficient reason to expel the children listed in section A from Al-Huda Pre-School.
- Early withdrawal, **with prior two week written notification**, from the pre-school will result in cancellation of automatic direct withdrawal/credit card charges or the return of un-used post dated checks.
- If it is necessary to employ a professional collection agency and/or attorney to enforce or to collect a judgment based upon this agreement, I will be responsible for paying all expenses accrued including, but not limited to, collection agency fees, court fees and attorney fees.
- I hereby authorize Al-Huda Pre-School to check and/or verify all references and financial information to include without limitation credit report

By signing below I acknowledge that I have read and understand this form in its entirety.

X _____
Signature of Guardian

X _____
Date

Any outstanding balance?		<input type="checkbox"/> No	<input type="checkbox"/> Yes	If Yes, How Much? _____ (see Preschool for payment plan form)
Office Use	Complete _____	Received ___/___/___	Missing _____	
	Incomplete _____			

Appendix C -- Credit Card Charge Authorization Form

- I hereby authorize Al-Huda School to automatically charge my Credit Card on a **bi-weekly** basis for the amount designated below.
- I understand that this Credit Card Charge Authorization will remain in effect on an ongoing basis until two week written notification of withdrawal, is received by the pre-school office.
- Please include a copy of your Credit Card, front and back.

Name: _____ Phone # (Home) _____ (W) _____
 Address: _____ Apt. #: _____
 City: _____ State: _____ Zip: _____

I authorize automatic **bi-weekly** charges in the amount of \$ _____ (B) to be made to my credit card.

Note: Checks must be dated with the following dates:
 8/21/17, 9/4/17, 9/18/17, 10/2/17, 10/16/17, 10/30/17, 11 /13/17,
 11/27/17, 12/11/17, 12/25/17, 1/08/18, 1/22/18, 2/5/18, 2/19/18,
 3/05/18, 3/19/18, 4/02/18, 4/16/18, 4/30/18, 5/14/18, 5/28/18

Any parent wishing to enroll their children for the summer program must sign a new agreement form.

Please provide the following information about your Credit Card:

Credit Card Number: _____ Exp. Date: _____ Sec. Code (3 digit) _____
 Please circle one: Amex, Visa, MC, and Discover

This agreement will take effect on the first Monday of attendance.

By signing below I acknowledge that I have read, understood and completed this form and that I authorize Al-Huda Pre-School to charge my credit card of a regular specified amount indicated above until my obligation to pay the 2017-2018 school year tuition \$ _____ have been met.

 Parent signature/date

 Authorized school official signature/date

 Print complete name

 Print complete name

Please turn in this completed form together with a **COPY OF YOUR CREDIT CARD** to the Pre-School office by **the first Monday of attendance.**

Office Use	Complete _____	Received ___/___/___	Missing _____
	Incomplete _____		_____