



3 Smith Street
East Hampton, CT 06424
860-267-0303 (phone and fax)
[Belltowndiscoverycenter@gmail.com](mailto:belltowndiscoverycenter@gmail.com)

Preschool Parent Service Contract

Effective August 1, 2023- July 31, 2024

Child's name: _____

Early morning care (6:30 - 7:00 am): YES / NO (\$20 extra a week per child)

| Full days needed | |
|------------------|--|
| Monday | |
| Tuesday | |
| Wednesday | |
| Thursday | |
| Friday | |

Price list attached.

Total weekly Tuition: \$ _____

If a family gets behind on tuition more than two weeks the child will not be able to attend until balance is paid in full.

Rates may change at any given time due to inflation rates. An advanced notice will be posted.

I agree that read and understand the handbook and policies.

I AGREE TO ALL CONDITIONS AS SET FORTH IN THIS CONTRACT AND PARENT HANDBOOK AND UNDERSTAND THAT THIS CONTRACT IS BINDING. This agreement is in effect from date of signing until child departs from Belltown Discovery Center, LLC or parent signs a new contract after a room change.

Parent / Guardian's signature _____ Date _____