



**MT PLEASANT PRESBYTERIAN LEARNING CENTER  
REGISTRATION AGREEMENT 2024-2025**

I understand the registration fees are NON-REFUNDABLE and may not be applied to current or future tuition payments.  
I understand a 2-week notice must be given for early withdrawal from the program and tuition must be paid up until the withdrawal date.

In addition to the tuition owed upon withdrawal, I understand an early withdrawal fee, enforced after the first day of class, must be paid as follows and fees do not apply towards tuition: \$100 for infant/toddler classes, \$200 for 2K-3K classes, \$400 for 4K classes

I understand the **FIRST tuition payment for the 2024-2025 school year is due on September 1, 2024.**  
I understand that I must sign my family up for the FACTS Tuition Payment System upon my acceptance in the program.  
I understand that the FACTS fee for tuition payment in full (one payment) in September is \$25, for semester payments is \$25 and for more than 3 payments is \$55 for the school year per family.

I understand the following tuition rates for the 2024-2025 school year:

CLASS	MONTHLY	SEMESTER	YEAR	Days/Week	HOURS	REGISTRATION
Infants (3-11 mos)	\$155	\$697.50	\$1,395	1	9-12 Friday	\$155
Toddlers (12-17 mos)	\$277	\$1,246.50	\$2,493	2	9-12 T/TH	\$277
Toddlers (18-23 mos)	\$277	\$1,246.50	\$2,493	2	9-12 M/W	\$277
2K 3 day	\$404	\$1,818	\$3,636	3	9-1 MWF	\$404
2K 5 day	\$467	\$2,101.50	\$4,203	5	9-1 M-F	\$467
3K 3 day	\$404	\$1,818	\$3,636	3	9-1 MWF	\$404
3K 5 day	\$472	\$2,124	\$4,248	5	9-1 M-F	\$472
4K 5 day	\$478	\$2,151	\$4,302	5	9-1 M-F	\$478

I understand that subsequent tuition payments will be due on the first or fifteenth of each month, depending on agreement with FACTS, and the last tuition payment being due on May 15th, 2025 (for May's tuition).  
I understand if my first monthly payment is not made by September 15<sup>th</sup>, 2024, my child's space at MPPLC may be forfeited.

I agree to read and follow the Policies and Procedures in the 2024-2025 MPPLC Parent Handbook, which will be made available to me in September 2024.

I understand a non-refundable, supply fee is due at the same time as the first month's tuition payment for Infants – 4K classes as follows: Infant, Toddler (12-17month), Toddler (18-24month) - \$120, 2K classes - \$125, 3K and 4K classes - \$150

I agree to provide MPPLC a current SC Certificate of Immunization by September 30, 2024, and that MPPLC does not accept medical, religious or other exemptions to immunizations.

I understand that current students are given first priority in the enrollment process.  
I understand that siblings of current students are given second priority in the enrollment process.  
I understand that current church member's children are given third priority in the enrollment process and that in order to be considered a full church member the parents have to have COMPLETED the New Member process by January 30<sup>th</sup>, 2024, and be considered by the church a full member on that date.

I understand that the director and assistant director have the discretion to balance the classes according to gender.  
I understand that teacher/class requests are not accepted.

I understand that I will notify my child's teacher and director of any allergies and provide allergy information in full to the teacher and school. I also understand, with certain food allergies, that I may need to provide appropriate foods/snacks for my child.  
I understand that I will notify my child's teacher and director of any developmental disorders or health issues that they should be aware of (ex. ADHD, asthma, autism, hearing or vision impaired, etc.)  
I understand that if my child requires emergency medication such as an EpiPen, this prescription along with a doctor's order, and a written parent consent for administration by a staff member, must be kept in the school office. I understand that I must provide a color photo of my child and written instructions for any allergies so that these notices can be posted in my child's classroom and in the main office should an emergency situation occur.

I, the parent/guardian, have registered my child \_\_\_\_\_ at the Mt Pleasant Presbyterian Learning Center for the 2024-2025 academic school year. I have read and understand the registration, withdrawal, tuition, immunization, class placement, allergy and medical expectations of Mt Pleasant Presbyterian Learning Center and agree to the terms listed above. I have also fully disclosed all pertinent information regarding the well-being of my child.

Signature of parent/guardian \_\_\_\_\_

Date \_\_\_\_\_ Printed name of parent/guardian \_\_\_\_\_