NLC
NAS LEARNING CENTER

Sunday School Enrollment Agreement

Sunday, September 5, 2021 to Sunday, May 22, 2022, 1:00 pm-4:00 pm

Terms and Conditions of Enrollment

- The registration fee of $35 per student is non-refundable.
- Full tuition and fees are due for any student who withdraws after August 31st.
- It is understood that upon signing this enrollment agreement the signers are obligated to pay tuition and fees for the entire academic year whether or not the student remains enrolled, except under special circumstances approved by NLC.
- Monthly tuition payments (the annual tuition broken down into 9 installments) are due the first day of each calendar month that we are in session, with the exception of the first payment, which is due on 5/23/21 for all returning students.
- Late payment incurs a late fee of $30/month, due immediately.
- The school year includes 34 Sundays for children and youth, and 25 Sundays for adults.

I enroll the following in NLC Sunday School:

Student Name(s)	Grade	Annual	Twice	Monthly
Child 1:		$990.00	$440.00	$110.00
Child 2:		$810.00	$360.00	$90.00
Child 3:		$675.00	$300.00	$75.00
Child 4:		$675.00	$300.00	$75.00
Child 5:		free	free	free
Adult (parent) :	--	$180.00	$80.00	$20.00
Adult (single):	--	$720.00	$320.00	$80.00
Adult (couple):	--	$1080.00	$480.00	$120.00

Registration Fee: Total Number of Applicants @ _____ x $35 = _____
Paid by: ___ cash ___ check #____ ___Zelle ___PayPal*

**Note: PayPal payment requires an additional 3% to cover fees.*

Please select your payment option:
_____ Option 1: Twice, on 10/3/21 and 1/9/22.
_____ Option 2: Monthly installments due on 10/3, 11/7, 12/5, 1/9, 2/6, 3/6, 4/3, 5/1.

By signing below, I agree to the terms and conditions above, and to follow the rules and regulations in the NLC Handbook available online and in print.

Mother:_____ _____
Signature **Date**

Father: _____ _____
Signature **Date**

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Parent & Emergency Contact Form

Contact Information for Parent/Guardian 1:

Name/Relationship	
Phone Number/s	
Email Address	
Mailing Address	

Contact Information for Parent/Guardian 2:

Name/Relationship	
Phone Number/s	
Email Address	
Mailing Address	

Emergency Contact Information:

Name/Relationship	
Phone Number/s	
Email Address	
Mailing Address	

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Liability Waiver

I, _____, hereby release Nas Learning Center of all responsibility concerning the safety of my child/children inside and outside of the building during non-school hours. I also agree to the following:

- I will be present with my children and be responsible for them at all times unless they are a registered student of NLC Sunday School and under teacher supervision during school hours.
- Any damage caused by my child/children to the NLC building or the grounds is my responsibility.
- I understand that Nas Learning Center does not provide childcare during non-class times on Sundays. I must pick up and be responsible for my children when classes are dismissed.
- During events such as Parent/Teacher Conferences and staff meetings where children are present with me, I will arrange adequate child care for them.

I understand and agree to the statements listed above.

_____ _____

Signature **Date**

Photo Release Waiver

Still photographs and video clips of students are frequently used in NLC publications, on our website, in advertising, and in school promotional material. If you prefer your child's image **not** appear, please indicate by signing below, and we will do our best to honor your request. We cannot guarantee, however, that your child will not appear in a group photo or in a photo or video that might be taken by a student, parent, other individual, or by the press.

If you would prefer that NLC **not** use your child's image, please indicate by signing below:

_____ _____

Signature **Date**

Please sign above <u>only</u> if you request that NLC <u>not</u> use your child's photo.

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Medical Consent & Allergy Information

I, _____, give permission for Nas Learning Center to provide all necessary emergency medical, dental or other care for my child/ren. This care may be given under whatever conditions are necessary to preserve the life, limb, or well-being of my dependent(s). I will be responsible for all expenses necessary to ensure my child's medical wellbeing. In case of emergency, Nas Learning Center is required to try to contact me and/or the other parent or legal guardian and/or our emergency contact at one telephone numbers listed above. At no time will Nas Learning Center attempt to drive the sick or injured child to an emergency medical facility.

Child 1:
S/he is allergic to:

In case of exposure, please:

I give my consent for Nas Learning Center staff or representatives to administer the protocol described above. _____ (initial here)

Child 2:
S/he is allergic to:

In case of exposure, please:

I give my consent for Nas Learning Center staff or representatives to administer the protocol described above. _____ (initial here)

I understand and agree to the statements listed above.

_____ _____
Signature **Date**