

YOUNG LEADERS ACADEMY

3809 BARDSTOWN RD, LOUISVILLE KY 40218

(502) 632-1070 (502) 319-0335

Louisvilleyoungleaders@gmail.com

PAYMENT CONTRACT

Parent/Guardian must read and sign this agreement prior to enrollment.

I, the parent/guardian of _____, hereby state that I have received and read the Young Leaders Academy LLC Parent Handbook. I agree to comply with the rules and regulations of the Center regarding fees, attendance, health, clothing, and other items specified in the handbook. I am aware of the calendar and the scheduled days off. I agree to pay Young Leaders Academy LLC the tuition and registration fees. I understand that I am responsible for the full payment, in advance. I understand that failure to comply may result in termination of childcare, unless the contract is amended and approved prior to the tuition due date. My signature below indicates that I have had this material explained to me and that all my questions have been satisfactorily answered.

Weekly Tuition: \$ _____

Registration Fee: \$ _____

Total: \$ _____

Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

Date: _____

Signature of Director: _____

Date: _____