



Enrollment Agreement 2025

Fees & Provision of Care

Tender Years of Deale 6006 Drum Point Rd. Deale, MD 20751

faith@tenderyearscenter.com

443-203-6325

Name of Child: _____

Date of Birth: _____

Date to Begin: _____

Parent Name & Address:

Parent Email(s) for Center Communication:

Parent Cell(s) for Center Communication:

Deposit \$ 175 (non-refundable)

Week #1 \$ _____

Activity Fee \$ 15

TOTAL \$ _____ Due By _____

Monday - Friday 7:00am - 4:00pm

INFANT CARE (6 weeks - 18 months)

☐ \$475 / week

TODDLERS (18 months- 24 months)

☐ \$425 / week

Monday - Friday 7:00am - 4:30pm

TWO YEAR OLDS

☐ \$300 / week

☐ + \$40 extended care until 5:30pm

THREES + FOURS (PRE-K)

☐ \$300 / week

☐ + \$40 extended care until 5:30pm

Monday - Friday 7:00am - 5:30pm

(KINDERGARTEN - 5TH)

☐ \$175 / week during school year

☐ \$ 50 / day as needed

A non-fundable deposit of \$175 is due upon first time enrollment. Weekly tuition is due the Friday before the upcoming week of care. The Monthly Activity Fee is due before the 5th of the month. All tuition and fees are invoiced through Brightwheel and payable by check, cash or Zelle faith@tenderyearscenter.com

By my signature below, I am aware that I _____ have enrolled my child _____ in the above program, electing the provision of care as described. Deposit fee is due only upon enrollment and is non-refundable and non-transferable. Monthly activity fees and weekly provision of care tuition is due as long as my child is enrolled in the Center. I agree to the above start date, program choice, tuition and fee schedule.

____/____/____