

*Calvary Chapel Lake Arrowhead Preschool*  
Admission Contract

My child, \_\_\_\_\_, will be attending Calvary Chapel Lake Arrowhead Preschool on the following days and times: \_\_\_\_\_

The tuition amount of \_\_\_\_\_ will be paid \_\_\_\_\_  
\_\_\_\_\_ prior to the care of my child.

**If I need to withdrawal my child from the program I will provide the preschool director with a two week written notification.**

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Parent/ Caregiver Signature      Date