

## Tuition Agreement

Child Name

| Person Responsible for Payment |  |  | Relationship to Child |  |
| :--- | :--- | :--- | :--- | :--- |
| Social Security No. |  |  | Email |  |
| Cell | Work |  | Home |  |
| Address |  |  |  |  |
|  |  | Address | City | State |

Inclusive Program : Empowered Sports and Fitness, LLC Groups run for the length of the package you purchase (i.e. 10, 15, or 20). Additionally, the amount of time in each session is dependent on the group you enroll the athlete (i.e. 90 min or 45 min ). The group ratio is 2 children to 1 teachers. Empowered Sports and Fitness, LLC Groups offer a carefully planned, developmentally appropriate curriculum that provides each child the opportunity to feel successful while learning new skills. Your child will engage in inclusive group activities that focus on participation, sharing, following directions and rules, and taking turns. The goal of our group programs is to help your child develop social awareness, communicate and collaborate with peers, problem-solve, and respect the individual differences of others-all while having fun!

Registration Fee: 10 Sessions = \$2250, 15 Sessions = \$2850,
and 20 Sessions $=\$ 3450$
Attendance/Make-up/Cancellations: Empowered Sports and Fitness, LLC groups require prior notification if you must miss a session. You can notify us via email @ empowered.sports.fitness@gmail.com or phone at (646) 2792324. There are no make-ups unless Empowered Sports and Fitness, LLC has to cancel a group session.

Billing: Payment must be made in full at the time of registration. We accept credit card, cash, check (make payable to Empowered Sports and Fitness, LLC), Zelle, or Venmo payment. A receipt will be provided for all payments.

Refunds: There are NO refunds after the first session.
Termination of Enrollment: Termination of enrollment less than 2 weeks before the first session will result in a $\$ 250$ processing fee.

Schedule: Schedules are coordinated for the group and therefore cannot be changed.
Print Name Client Signature/Person Responsible for Payment Date

Owner Print Name Owner Signature Date

