

Payment Plan 2024-2025

Located in Kosair for Kids Center on Masonic Homes Kentucky's Louisville Campus

3800 Tom Larimore Lane • Masonic Home, KY 40041 P: 502.753.8222 • TF: 866.764.6631 • F: 502.753.8223 **SproutlingsDayCare.com**

CHILD/REN'S NAME:	
Parent/Guardian:	
(Your child's tuition is based on classroom enrollment. It does not change with the child's age.)	
PREVIOUSLY ENROLLED / Annual Registration Fee \$100 + Activity Fee ☐ Please add \$ to my weekly draft	e \$75 for each child
☐ Please add \$ to my credit card on file	
☐ I've attached a personal check in the amount of \$ for my child(ren)
NEW ENROLLMENT / Registration Fee \$50 + Activity Fee \$75 for each	
☐ Please add \$ to my weekly draft	ii ciiid
☐ Please add \$ to my credit card on file	
$\hfill\square$ I've atatched a personal check in the amount of \$ for my child(in the context of the context o	ren)
□ NO CHANGES IN PREVIOUS YEAR'S BANK PAYMENT INFORMATIO	N
PAYMENT FREQUENCY	
☐ Annually (first day of school year) ☐ Monthly (first business day of each month) (Credit cards or personal check only) (Personal check only)	☐ Weekly (Monday of each week)
(Credit cards or personal check only) (Personal check only)	(Bank draft or personal check only)
DISCOUNTS	☐ Bi-weekly (Monday of every other week) (Credit card only)
☐ I have selected an annual payment; please apply a 5% discount.	(3.32.1.32.1.2),
☐ I have multiple children attending Sproutlings; please apply a multi-child dischild attending will receive a 10% discount off the oldest child's tuition. Fam attending also will receive a 5% discount off the second oldest child's tuitio	illies with more than two children
☐ I am a Masonic Homes Kentucky employee; please apply my eligible emplo deduction is required. (for Sproutlings Admin) Eligible Discount:% Signature	
PAYMENT OPTIONS	
☐ Personal/Business Check (Checks should be made payable to Sproutlings) Signat	ure
Bank Draft** (weekly only)	
Name of Financial Institution:	
Account Number:	
Signature:	Date: from your bank on bank letterhead providing
customer name, routing and account numbers signed by bank representative and re	
** I hereby authorize Masonic Homes of Kentucky, Inc. to initiate automatic withdrawals from malso authorize Masonic Homes of Kentucky, Inc. to make deposits to this account in the ever not to hold Masonic Homes of Kentucky, Inc. responsible for any delay or loss of funds due to me or by my financial institution or due to an error on the part of my financial institution in deposition.	nt that a withdrawal is made in error. Further, I agree o incorrect or incomplete information supplied by
☐ Payroll Deduction* (for Masonic Homes of Kentucky employees only)	Dete
Signature: * I authorize Masonic Homes of Kentucky to deduct Sproutlings tuition payments (26 per year) form according to the terms outlined on this form. Please let us know if you would also prefer deducted from your payroll.	
	ove notice and will now in full for the
If I choose to permanently withdraw my child, I agree to give 30 days. (initial here)	ays notice and will pay in rull for the