



HCCA Pre-K Fee Worksheet

NAME: _____

Education Gap Fees

2-Days per week

\$3500/ year \$1750/ semester \$350/ month

Please fill in, consecutively, your child's appropriate Education Gap fee, from above **starting with your oldest child.**

1	Child #1	
2	Child #2 (please take the applicable fee X .95)	
3	Child #3 (please take the applicable fee X .90)	
4	Child #4 (please take the applicable fee X .90)	
5	Child #5 (please take the applicable fee X .90)	
6	Non-Refundable Registration Fee: Total number of students X \$125 (due with registration forms)	
8	Total Education Gap Fees (add lines 1-7)	

Payment Options

Pay In Full ()

Monthly ()

OFFICE USE:					
Payment Rec'd	Date	Cash	Check #	Notes	Amount
Registration Fee					