



Early Childhood Family Education (ECFE) Tuition Flexibility Application

Name: _____

Child's Name: _____

Class Day and Time: _____

Phone Number: _____

Email: _____

What amount are you able to pay per month? Regular monthly tuition is \$40/month.

- ☐ \$10/month
- ☐ \$15/month
- ☐ \$20/month
- ☐ \$25/month
- ☐ \$30/month
- ☐ \$35/month

Please briefly describe the reason for your need.

If you have extenuating circumstances and cannot afford \$10/month please contact our secretary Eileen Campbell or Director Rachel Amdahl to discuss other options (218) 333-3119 We will review this application and adjust your invoices accordingly. Thank you.