

PARENT ACREEMENT

		PARENT AG	REEVIENI	
Children's Names:	1.		Date of Birth:	
2	2.		Date of Birth:	
3	3		Date of Birth:	
Parent's Names:			cell pho	nes: M ()
Address:	(street)			F ()
	(street)	(city)	(zip)	
Name of Company	for which you wo	ork:		
Mother:			Work Phone: (_)
Father:			Work Phone: (_)
ENROLLMENT FEE I understand that the fee for enrolling the school.	ng each of my children is payal	ble at the time of submitting the	nis application and that this fee	is not refundable unless my child is denied admission by
round. Monthly payments are due weeks of summer are charged week (2) I understand that a \$25 late pay received by 6:00p.m. on Tuesday. (3) I understand that there is a \$35 (4) I understand that Pierce Acaden care. This fee is due at pickup and protective agency. Children enrolled	by the 5th of each month beging and are due each Monday in the syment fee will be added to more charge for returned checks and the closes promptly at 6:00p.m is payable to the staff membered in our morning program mu	inning on August 5th and end n advance. I agree to make p nthly payments not made by the declined credit cards, and I at an and I agree that if my child who stayed with your child.	ing on May 5th. This tuition of ayments regularly as they are to 5th of the month, and that a gree to pay this charge upon rous left after this time for whater Children not picked up by 6:30 Children left after 2:45 p.m. where the agent was a superior of the children left after 2:45 p.m. where the agent was a superior of the children left after 2:45 p.m. where 2:4	\$15 late payment fee will be added to weekly payments not
before the Fall Semester, Labor Da (2) I understand that the Fall and Sp week summer session are allowed 2 (3) Public School children are allowed a child attends one or more da	cademy is closed for a holiday yy, Thanksgiving Day and the pring semesters are charged me weeks of vacation time for weeks of vacation time ays during the week.	Friday after, a week at Christ onthly and that no credit for a hich no tuition will be charged during the school year AND	mas (usually the week betweek bsences will be given during the d when the child is not in atten- 2 weeks during the Summer w	C day, Good Friday, July 4th, Memorial Day, the Friday on Christmas and New Year's) and New Year's Eve/ Day. is 41 week period. Children who continue through our 11 dance from a Monday through a Friday. hen they are absent an entire Mon - Fri. Full rate is charged a notification regardless of attendance.
required by the state are current.	nt form and I understand that I	I will be responsible for all em		municable and infectious disease and immunizations demy is not responsible for normal childhood accidents. All
GENERAL PROCEDUR (1) All preschool and Kindergarten (2) Children must be left in the pres (3) Parents will be advised of specia (4) I agree to have my child picked	children should have a completence of a staff member and on all problems and concerns about	aly parents or persons authorize their children. In cases of m	ed by parents may pick up you inor injuries, a "boo-boo" repo	
AGREEMENT I have received a copy of the school	's policies and procedures, phi	ilosophy and goals, and have	read the foregoing statement of	f policy, and I agree to abide by it's terms.
SIGNATURES: (MOTHER)		DATEDATE		
(FATHER)		DATE		
Enrollment Fees: \$	Supply Fee \$	Tuition : 1	Fall/Spring \$	Summer \$