AGREEMENT

NAME OF CHILD:		
Fee Amount: **$**	**MON T UE W ED THUR FRI**	**FULL TIME _____** **PART TIME_____**

Payments are due on Monday mornings or as otherwise indicated.

Services to be provided as part of the day care fee (examples: transportation, care, meals, etc.)

Arts and crafts, sports activities, reading and math enrichment and many other activities are just a few of the many things offered throughout the day. A morning and afternoon snack will also be offered.		
PLEASE ALLOW ONLY A 10 HOUR TIME FRAME		
Child's Arrival Time:	**Child's Departure Time:**	**Person(s) Designated to whom child may be released:**
Late Fee: $20 per 15 minutes after 6 p.m.		

All accounts not brought up to date by the last day of service will be turned over to a collection agency.

I, the parent/guardian:

received complete written program information at the time of enrollment.	
agree to update the emergency contact/parental consent form information whenever changes occur or every 6 months at a minimum.	
Signature of Operator **Date:**	
Signature of Parent or Guardian **Date:**	
Date of Child's Admission:	**PERIODIC REVIEW**
Date of Withdrawal:	**Signature of Parent or Guardian:** **Date**