King's Kids Day Care, Inc.

Parent Contract

Please read the following agreement very carefully before signing.

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|---------|---|-------------------|--|--|--|--|
| 1. | Pay on the first day of each week an advance tuition fee of \$, with no deductions for absences or holidays. I understand that my payments will be applied first to late fees, returned check fees, and past due tuition before being applied to current tuition. | | | | | |
| 2. | If my child is absent for a period of one week or more, I agree to pay one-half (1/2) of each week's tuition, in advance, during his absence. I understand that I will be allowed a total of 2 weeks of ½ tuition during a 1 years period. Any other absences of 1 week or more will be my responsibility to pay tuition in full. I also understand that I am not eligible for the ½ tuition rate until 6 months after my start date. | | | | | |
| 3. | There is a registration fee of \$_50.00, which is non-refundable. | | | | | |
| 4. | Children will not be released to anyone without permission from the parent/guardian. Children will not be released to an adult who appears to be under the influence of drugs or alcohol. | | | | | |
| 5. | Should the Director of the Center feel that my child cannot adjust to the Center's programs, I will be given a two weeks, notice before expecting my child to be withdrawn. | | | | | |
| 6. | I have read and understand the policies outlined in the King's Kids Day Care Center's Parent Handbook. I agree to abide by and follow through with all its contents. | | | | | |
| 7. | This contract is subject to change by King's Kids Day Care Center, Inc. | | | | | |
| Paren | t Guardian Signature: | Telephone Number: | | | | |
| Days a | and hours the child will be in the Center: | | | | | |
| Child's | s Name | Date of Birth | | | | |
| Child's | s Name | Date of Birth | | | | |

Child's Name_____ Date of Birth_____