New families



## **ENROLLMENT AGREEMENT**

Child(ren) Name(s)	
Parent/	Guardian Name(s)
Please	initial next to the following statements:
	I hereby apply for enrollment at Educare Learning Center. My child(ren) will begin attendance on(date). Charges will be incurred based on the initial enrollment date. A two-week notice is required for changes to the initial start date.
	I acknowledge that I have received a copy of the Educare Parent/Guardian Policy Handbook (revised 1/7/19), and I do commit to read and follow these policies. I am aware that if, at any time, I have questions regarding the Educare Parent/Guardian Policy Handbook I should direct them to administration. I also am aware that Educare, at any time, may upon reasonable written notice, change, add to, or delete from the provisions of the Parent/Guardian Policy Handbook.
	I acknowledge that I have received a copy of the "Guide to Regulated Child Care" (OCC 1524, revised 10/18).
	I acknowledge that I have received a copy of the current rate sheet (effective 9/2/19)
	I have read Educare's Head Lice Policy and agree to abide by this policy.
	I understand that a one-month withdrawal notice is required and my account will be charged accordingly based on the date <u>written</u> notice is received.
	I understand that a two-week notice is required for any schedule changes.
	I understand that the tuition deposit will be applied to my final tuition statement only is a <u>written</u> one-month withdrawal notice is given.
	I understand that I am encouraged to attend a program orientation within 90 days of enrollment.
Transp	portation Permission (School-Age Only)
Child(re	en) Name(s)
	check the appropriate selection below:  ☐ I give permission for a member of Educare administration to transport my child to Educare in the event that he/she miss the bus after school. (initial) I understand that there will be a \$10.00 charge for this service.  ☐ I would like a phone call prior to my child being picked up.  ☐ I do not need a phone call in order for my child to be picked up.  ☐ I do not give permission for my child to be transported from school to Educare. I would like a phone call to notify me and I will find alternate transportation.
Parent/G	uardian Printed Name Parent/Guardian Signature Date