Faith Lutheran Church and Preschool Enrollment Contract

It is my desire to have my child(ren) enrolled in the preschool and/ or childcare program at Faith Lutheran. I have received a copy of the handbook. I have read, understand & agree to abide by the guidelines contained therein. _____

I understand that there is 6–8-week transition period . During this time, the staff will help my child learn the routine, schedule & center wide agreements, The staff & parent/legal guardian will also make observations pertaining to my child's ability to adapt to preschool. I further understand that it is a team effort, preschool, parent/legal guardian & professionals, to coordinate effective & reliable strategies for any behaviors that may occur while participating in a group setting at Faith Lutheran Preschool & Daycare_____

_____ I am aware that I must provide a completed **Annual** Physician's form and a copy of the immunization record for the preschool/ childcare.

_____ I understand Faith Lutheran Preschool/childcare fees are _____ per month based on the following schedule: ___M ___ T ___ W ___ Th ___ F. Any changes must be made in writing to the Preschool Director and will be attached to this enrollment contract.

_____ I am contracting for ___ Year-Round ____School Year Only ____ Summer Only arrangements.

_____ I understand tuition payment is due each month and a late fee of $30 will be added to any bill that is not paid by the 10th of the month in which it is due. Nonpayment after the 15th of the month my child will be removed from the roster unless arrangement for payment has been coordinated & approved by the Preschool Director.

_____I understand that tuition payments are processed through automatic withdrawal or the "Vanco Mobile" App. I understand that automatic withdrawal payments are processed through my bank account on the 1st, 5th, or 10th of each month. Credit Card payments are accepted through the main office only, not the app and are subject to a 4% transaction fee.

_____ I have reviewed the late pick-up policy with the director and confirm that if I pick my child up after his/her designated pick-up time I will be charged a $10 fee. After closing time, the late pick up is $1 per minute and must be paid to the staff member who is closing that day at the time of pick up.

_____ I understand the pick-up policy for other than parental pick up.

_____ I have reviewed the Health & Wellness policies in the handbook.

_____ I understand the snack/lunch guidelines.

_____ I understand the behavior guidelines and the responsibility I have as parent/legal guardian to work with the Preschool and follow through on agreed upon behavioral plan and or the possibility to find alternative placement.

_____ I understand that there is a one-week vacation time that may be used for family vacation or sick time one time throughout the year. All requests due by the 15th of the month before vacation week request.

_____ _____

Child's Name PS Director's Signature Date

Parent's Signature Date