

# **ADMISSION CONTRACT**

Please initial each section listed below, then sign and date the last page.

Child's Name
Parent's Name:
1. REGISTRATION FEE AND MATERIAL FEE:
I understand that an annual, non-refundable registration fee \$ 245.00 and a materials fee of \$ 400.00
must be paid upon enrollmentAnnual registration and material fees will be charged every September
during enrollment period The registration fee and material fee are not prorated by months
2. FOUR-WEEK NOTICE DEPOSIT:
I understand that I'm paying four-week notice in advance to be used towards the last four weeks of withdrawal from preschool. I understand I must submit a <b>60-day termination notice</b> to the office prior to the last month. <b>The four-week notice deposit must be paid upon enrollment.</b>
3. WEEKLY TUITION AND LATE FEES: :
I understand the weekly tuition \$is due on Monday of each week
A late fee of <b>\$40.00</b> will be charged to my account if tuition not received by Friday (weekly)
I understand rates are subject to change with reasonable notice (minimum 30 days) as conditions require.
I have enrolled my child in the following program(s):
☐ Toddler Component (18 months to 36 months)
Preschool Program (2 yrs old to 5 years old)
Days: (check all that apply) IM IT IW ITH IF From am/pm to am/pm
No child enrolled in the toddler component shall be placed in the preschool program before the age of 30 months without written permission from parents and director's approval and signature.
I understand all fees and deposits are payable at the time of enrollment. A recurring payment authorization form must be signed for the weekly tuition before the first day of attendance

I understand that if my account is delinquent for more than one week, I may be asked to withdraw my child until my account is made current. The school cannot guarantee a child's spot will be held when a child is withdrawn due to non-payment of tuition. Any unpaid tuition fees will be sent to a third-party collection agency
I understand a late fee of <b>\$25.00</b> per week will be charged to my account for incomplete enrollment forms and documents.
I understand the weekly tuition is only payable via Procare/Tuition Express online access
I understand all fees are non-refundable
The full tuition payment is due and payable regardless of the number of days attended, or the days in which the Ekobé School of Learning are closed, number of weeks in the month, or any type of absence. Any missing scheduled day may not be reimbursed or switched.
4. LATE PICK-UP FEE:
I understand that if I fail to pick up my child by the scheduled closing time and agreed under contract, I will be charged a late-flat fee of <b>\$2000</b> per any minute up to every 15 minutes increments if my child is not picked up by 12:00 pm for half days or closing hour by 5:30p.m The late fee will not be prorated by minutes. If you enter any 15 min block, another <b>\$20.00</b> will be charged. Late-fee will be charged to your account
5. RETURNED PAYMENT FEE :
I understand that all payments returned by the bank will be charged a fee of <b>\$40.00</b> .
6. VOLUNTEERING/BUY-OUT POLICY:
I understand that I am expected to volunteer <b>10 hours</b> per school year towards the enhancement of the classroom or preschool aside from regular family events, conferences. I may choose to fulfill this obligation by a "buy-out" of volunteer hours at a rate of <b>\$20.00 per service hour</b> . Any volunteer hours or buy-outs that have not been fulfilled will be billed on June 1 at the buy-out rate, with settlement of volunteer hour requirements due by June 30 of the calendar year.
7. ANNUAL TUITION AND FEE INCREASE:
Ekobé School of Learning reserves the right to make any necessary tuition and fee increase annually to ensure the quality of service is met and to sustain operational costs. Annual Tuition and fees increase will be informed with at minimum thirty (30) days notice
8. CLOSED DAYS, HOLIDAYS, IN-TRAINING SERVICE AND PRESCHOOL'S RIGHT TO MODIFICATIONS AND TERMINATION: :
I understand it is my responsibility to obtain a copy of the updated calendar available on the preschool website stating all the closed dates like holidays, winter break, school events, and in-service training for teachers. I agree that I will not receive a refund, credit or any other allowance for such closing dates. The weekly tuition must be made in full during those closed dates.
I also understand that Ekobé School of Learning reserves the right to close the preschool on any such given day, revise the preschool calendar, determine the operating hours and services, modify any schedule or methodology

used, modify or terminate any staff schedule, needs, or responsibilities, and/or terminate its services.

9. ABSENCES/VACATIONS:

I agree to inform the school by 9:30 am if my child will be absent on any day. I understand that no allowances, credits, refunds, or make up days shall be made for occasional absences (i.e. sickness or travel). My regularly contracted tuition is due for all weeks when my child attends any part of the week. There is no credit given for single days. I also understand that if I withdraw my child during a vacation, a 60-day written notice shall be provided prior to leaving. All requirements for enrollment procedures should apply if I decide to enroll my child again upon return.

## 10. EMERGENCY CLOSINGS DUE TO CIRCUMSTANCES OF IMPACT: :

I understand that in the event of circumstances having a major impact upon the health or safety of students, teachers, staff, or that affects the cost of normally operating the preschool, including events such as acts of God, weather inclement, whether emergency, natural disaster, major building issues, war, epidemic, pandemic, famine or other public health emergency, government directive, or any other event that may disrupt service from time to time, or beyond preschool's control, I understand that all financial items stated in the agreement remain in effect and I am still obligated to comply with them.

## 11. ILLNESS:

I understand that I will be notified should my child become ill during the day, and that I will pick up my child promptly (within an hour period), or make arrangements for an authorized emergency contact person to pick up upon such notification. If my child is exposed to or contracts a contagious disease, I agree to notify the school and I understand that my child will be re-admitted according to doctor approval notice. I understand that weekly tuition is still due during such an illness period.

# 12. DAILY SIGN-IN AND SIGN-OUT:

I understand that I am required by California State Law to sign my child in and out daily. I understand that I am required to enter the school to drop off and pick up my child and that I must escort my child to and from the designated classroom. I understand Ekobé School of Learning reserves the right to terminate the contract if I often refuse or forget to sign in and out daily. \_\_\_\_\_\_\_\_

#### 13. WITHDRAWAL:

I understand that I am required to provide a **60-day notice of withdrawal** (form provided online) from the program. If this withdrawal notification is not provided, I agree to pay all tuition and fees during those weeks, whether or not my child attends. I understand that when my child is withdrawn, she/he will only be eligible for re-admission based upon space availability and all other enrollment criteria. If my child is selected for re-enrollment, I will be required to complete an entire new Enrollment Agreement at the new and current rate and pay a new registration fee at the current rate.

#### 14. POLICIES AND STATE REGULATIONS:

I understand that the above policies are not an all-inclusive list of policies, and that my child, my family members, authorized agents and I are bound by state child care regulations, the Parent Handbook, and all other school policies, which may be modified at any time without notice. I also understand that the regulations of the state in which my child attends may prevail over these policies. I further understand that my continued enrollment constitutes my acknowledgement of, and agreement to abide by, all policies and state regulations.

I understand that Ekboé School of Learning respects and values all families, children, cultures, traditions, and diversity. I understand I must respect any other children, family, teacher, staff members attending or visiting the preschool who have different values, traditions, or views of the world other than mine .\_\_\_\_\_

#### 15. INSPECTION AUTHORITY OF CHILDCARE LICENSING

The State Licensing Department has the authority to interview children or staff without prior consent. The State Licensing Department has the authority to inspect, audit, and copy child or childcare center records upon demand during normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the requirements in Sections 101217(c) and 101221 (d). The State Licensing Department has the authority to observe the physical condition of the child(ren), including conditions that could indicate abuse, neglect or inappropriate placement.

#### **16. PARENT HANDBOOK:**

I have received a copy of the Parent Handbook (available online/website). I have read and understand its contents and policies and agree to be bound by the same. I have signed and provide the Parent Handbook Acknowledgment (available online/website)..\_\_\_\_\_

# 17. NO MODIFICATIONS:

No terms of this Agreement may be altered, revised, modified or deleted by any person except in cases of policy change or rate change to which both the Director and I must initial. Any alterations, revisions, modifications or deletions of any term of this Agreement are null and void. I understand that Ekobé School of Learning reserves the right to revise and modify this contract every year to adjust any changes in policies and rates as necessary to do so. .

Ekobé School of Learning admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded to or made available to students at the school. It does not discriminate on the basis of race, color, national or ethnic origin in administration of its policies and programs. These policies have been reviewed with me and by the school management. I understand and will comply with the policies included in the *Parent Handbook*.

Parent Name:
Parent's Signature:
Director's Signature :
Date :

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