



ADMISSIONS AGREEMENT

Revised 08/2019

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Child's Full Legal Name _____

Date of Birth _____

Parents' Name(s) _____

We strongly believe in partnering with parents to provide an unsurpassed loving and nurturing, extended family environment through which our children will be ensured of having the greatest opportunities to become responsible members to their own families and leaders in our society. In order for our vision to materialize open communication between parents and members of our staff about respective responsibilities is imperative.

Please read the following policy statements, initial after each statement and sign the last page endorsing that you understand all policies within this document.

MISSION STATEMENT: Early Steps Learning Center (ESLC), a Christian based organization embedded with a culture of educators providing excellence in early childhood education in the communities we serve.

To formally register your child in our program you must complete the following:

- ❖ Enrollment forms filled out completely.
- ❖ Medical form signed by a physician.
- ❖ Non-Refundable Annual Registration/Curriculum Fee

All items must be submitted in at least (2) two days prior to your child's first day of attendance.

Tuition

I have enrolled my child in the following program:

from _____am/pm to _____am/pm Days **M T W Th F**

The tuition for the program I have selected is \$ _____ per week and is due and payable in advance. The tuition \$ _____ covers a ten (10) hour day. If you require additional hours, a premium rate will be assessed. The payment of weekly tuition is due on Monday or your child's first day of attendance. If payment in full is not received on due date, I agree to pay a late fee of \$25.00 per week. I understand if my account is continuously delinquent, I must withdraw my child. I understand that a processing fee of \$25.00 will be added to my account for any insufficient funds. Paid tuition is nonrefundable. ESLC reserves the right to not to reimburse paid tuition for backed dated services from ODJFS.

parent initial here _____



Registration Fee/Curriculum Fee

I understand that a one-time non-refundable Registration Fee of \$ _____ shall be paid to enroll my child. For those enrolling for the summer months only, a non-refundable Registration Fee \$ _____ shall be paid at the time of registration.

parent initial here _____

Re-Registration, Re-Curriculum Fees

I understand that each calendar year if my child has been enrolled six months or longer, I must pay an annual, nonrefundable curriculum fee of \$ _____ which is due no later than September 30th of each year.

parent initial here _____

Discounts

A 10% tuition discount is offered to each additional child from the immediate family enrolled in the center. The discount is applied to the lower tuition rate. Family discounts are not available for Registration Fees, Re-enrollment Fees or special programs or for any services. Family discount cannot be applied to any other promotions or discounts. In instances of agency reimbursement, discounts would not apply. Not applicable to part time enrollment

parent initial here _____

Reinstatement Fee

I understand that if my family takes a leave of absence or is absent past 10 days, a non refundable re-instatement fee will be required upon my return based on availability. I understand if I am away for more than 8 weeks the re-instatement fee is in addition to the annual registration fee.

parent initial here _____

Late Pick-Up Fee

Our Chardon Road and Wickliffe Centers are open from 6:30am to 6:30pm, Monday through Friday from January through December. Our Richmond Road Center is open from 6:30am to 6:00 pm, Monday through Friday. In addition, when the center closes early before regular closing hours, I understand that if my child remains past the scheduled closing time or if I exceed my authorization hours I will be charged, and I agree to pay an additional fee of \$20.00 per every fifteen minutes or any portion of a fifteen-minute period per child. Late Pick Up Fees must be paid before my child can be admitted the next day.

parent initial here _____

Drop Off Time

I understand that my child must be in his/her (Infant/Toddler) program no later than 9:30 am. If my child is in the Preschool Program he/she must be in by 9:00 am. A grace period may be extended if my child has an appointment she/he must attend. Extensions are granted with prior approval and/or proper documentation.

parent initial here _____

Holidays

I understand that the center is closed the following holidays: New Year's Day, Martin Luther King Jr., Good Friday (in service training), Memorial Day, Fourth of July, Labor Day, Thanksgiving Day and day after Thanksgiving, Christmas. I understand that I will not be granted a refund, credit or make up day, or any other



allowances for holidays. If a holiday falls on a weekend, it may be observed on either the preceding Friday or the Monday following.

parent initial here _____

Absentee Policy

Infants through Preschool Programs are based on a yearly tuition. Full payment is due regardless of any absenteeism. I understand I am responsible for full weekly payments regardless of any days not in attendance including but not limited to vacations, illness and holidays.

parent initial here _____

Vacation

I understand that no allowances are made for occasional absences. One vacation week will be granted each enrollment year at 100% of your child's program tuition. Two (2) week written notice must be given in advance. Applicable for children enrolled for a minimum of 6 (six) months at 50%.

parent initial here _____

Withdrawal Policy

I understand that I must sign a withdrawal form or give a written withdrawal two weeks prior to withdrawing my child from the center. I understand that if this policy is not followed, I will be charged for the two weeks of tuition at a rate of \$_____ per week.

parent initial here _____

Child Accident Insurance

I understand that accident insurance is provided for all enrolled children during their hours of attendance for accidents, which may occur while at the center. I understand that this policy is secondary to any other insurance.

parent initial here _____

Daily Sign In & Out

I understand that I must sign my child in and out each day on the entry system and in the TAP system if applicable. Services may be disrupted if attendance is not recorded daily by parents. All parents are required to escort their children to and from their assigned classroom.

parent initial here _____

Code of Conduct

I understand that I am expected to read, understand and abide by the Core Principles set forth by ESLC. I must always conduct myself in a professional manner while on the premises of Early Steps Learning Center.

parent initial here _____

Special Programs

I understand that optional programs, activities and field trips and summer programs may be offered at an additional fee in lieu of regular tuition. In cases of agency reimbursement, fees for these programs are my responsibility.

parent initial here _____



Discipline Policy

I have read and understand "The Positive Guidance Plan".

parent initial here _____

Authorized Child Release

I understand that my child will be release only to those persons whose names have been listed on your enrollment form. I understand that I must advise the Director or other person designated as in charge, in writing, if any person other than those listed is to pick up my child and I must notify the Director or other designated person in charge if someone on your child's authorized pick up list will be picking up your child. **If an emergency arises the parent must provide a written, signed letter giving a person who is not on the enrollment form permission to pick up. Individuals picking up must be 18 years of age with a photo ID. Please explain the pickup policy ahead of time to those persons authorized to pick up your child so they are not offended when identification is requested. The children's safety is our priority.**

parent initial here _____

Custody Agreements

If there is a custody agreement with your family, you must provide the center with court documentation indicating visitation and who has permission to pick up the child. Any disputes of visitation and pickup by the parent(s) will be defined by the listing of Parents and/or guardians on enrollment forms. Custodial parents have the right to remove pickup privileges from other parent for children based on legal documentation. ESLC will be held harmless in cases of parental disputes regarding custody of children and adherence to our release policy.

parent initial here _____

Solicitation

I do hereby release and hold harmless Early Steps Learning Center (ESLC) and its employees from any liability or accidents that may occur should I retain the services of any ESLC employees for the care of my child (ren) outside the center. I also agree not to solicit any ESLC employee for alternative childcare employment opportunities.

parent initial here _____

Photographs

Photographs and videos of children participating in Early Steps Learning Center's programs may be taken from time to time and may appear on our web site or in newspapers, magazines, brochures or other publicity materials. Teachers to enhance our learning environment also use them within the center. Your signature approves your child to be part of such material for the center without compensation.

parent initial here _____

Good Health and Illness

I understand that I will be notified should my child become ill during the day and that it will be imperative to make arrangements to have my child picked up within 1 hour of the notification. After 1 hour, ESLC reserves the right to charge a late pickup fee of \$20.00. If my child is exposed to or contracts a communicable/contagious disease, I agree to notify the Director immediately upon medical diagnosis.

parent initial here _____



Medication Administration

I understand that if I have given required authorization on ODJFS forms, ESLC will administer properly labeled prescription medications or over the counter medication to my child, the medication will be administered at noon only for the days the medication is prescribed. Over the counter medication will be administered according to manufacturer's instructions along with written authorization from my child's physician. ESLC reserves the right to deny administration of any medicine or if they child has not been given the first dosage.

parent initial here _____

If Your Child Is Bitten

Research shows that approximately 50% of all children who are enrolled in a childcare facility will be bitten, especially in the toddler programs. Early Steps will make every effort to prevent biting incidents. Unfortunately, your child may be bitten at some point. As with any incident, we do everything in our power to console and comfort your child. We will also inform the biter's parents and work with them and their child to modify their behavior.

parent initial here _____

If Your Bites Another Child

Although biting is not atypical behavior for young children, it is serious and will be tolerated. Early Steps will work with you and your child to develop a plan of action to correct the problem. However, if the biting is frequent, aggressive, breaks the skin, and does not lesson in a reasonable time frame, Early Steps will have to temporarily withdraw your child until the behaviors subsides.

parent initial here _____

Potty Training

I understand that ESLC will assist me in my effort with potty training. ESLC will not assist with toilet training if my child is not developmentally ready to achieve this milestone. All children ages 2 1/2 or above will participate in the potty assistance program, if parent and teacher agrees that the child is ready. Children who are participating in the potty training program must wear pull-ups and clothing they can manipulate themselves. Children will not be allowed to transfer to the Preschool Academy if they are not in the latter stages of being trained or fully potty trained.

parent initial here _____

Clothing/Belongings

Children's clothing shall be clearly marked with child's name. We request that children bring (2) complete change of clothing. ESLC is not responsible for unmarked clothing or expensive jewelry. Since children play on climbing equipment, ESLC does not permit open-toed shoes, wheel shoes, sandals or dress shoes. Sneakers are best.

parent initial here _____

Cell Phone

I understand that ESLC does not permitted children to have cell phones or other electronics in the classroom. If you need to reach your child for any reason; feel free to call the office. It is requested that cell phone usage be at a minimum upon arrival and pickup allowing for the staff and your child to engage with you.

parent initial here _____



Department of Social Services and Licensing Agency

I understand that the Department of Social Service and/or licensing agency shall reserve the right to interview children and staff, and to inspect and audit child or facility records without prior consent. The center shall make provision for private interviews with any child (ren) or any staff member and the examination of all records relating to the operation of the facility.

parent initial here _____

Inclement Weather

ESLC will remain open every day with the exception of weekends and designated holidays. If inclement weather occurs, please call the center to ensure that we are open or check local television networks. If provided text messages will be sent to cell phones.

parent initial here _____

Parent Handbook

I have a copy of Early Steps Learning Center Parent Handbook is available upon enrollment. I have read and understand the contents and agree to abide by it.

I hereby request my copy to be sent via email address on file _____

I prefer a hard copy of the handbook at time of enrollment _____

parent initial here _____

Parent Signature

Date

Parent Signature

Date