

____ I understand a \$25 late fee will be charged for all returned checks and after 2 checks have been returned, payment will only be accepted with cash, money order, or cashier's check.

____ I understand that tuition rates include all school holidays and that the tuition rate will not change for months that includes holidays. A list of current year holidays is attached. Similarly, there are no refunds for vacations or make up days for absences.

Notification of vacations

____ I understand there is a registration/re-enrollment fee during the months of June/July every year irrespective of when the child is enrolled at CDC.

____ I understand that a late fee of \$ 5.00 will be assessed for every 5 minutes that a child is not picked up at their scheduled time.

____ I understand Students enrolling mid-month will pay a prorated fee. Students removed from the program will also receive a tuition adjustment, provided 2 weeks advance notice is given for any termination.

____ I understand tuition is not reimbursable in any month when a natural calamity hits and Center needed to be closed.

____ I understand the communication with the center for any concern is direct communication by Telephone or by center email. Social media communication is not entertained by Immanuel CDC.

____ I understand children's pictures are taken for child's portfolio, center bulletin boards and Center web site.

____ I understand adults are to be polite and respectful in dealing with staff in person or on the phone, as staff will be with them. Foul language, cussing and swearing will not be tolerated in and outside the facility and parking lot. If this occurs, the CDC reserves the right to disallow the adult to enter the facility any longer.

____ I understand the licensing agency is mandated to look at the children's files during their inspection.

Conditions for Termination of Agreement

1. When a family does not adhere to the signed admission agreement as above, termination of the child from the program will become effective.
2. The Admission Agreement will be terminated if a child's behavior becomes a danger to any other child or staff member, or to the physical property of the facility. No refund of tuition will be due.
3. The ICCDC reserves the right to terminate or make changes to this agreement with 30 days written notice.

Enrolling Family Member's Signature _____ Date _____

Director's Signature _____ Date _____