



TODDLER CHILDCARE

Bucks

Tuition Agreement 2017-2018

I. This agreement is by and between:

Name of Parent(s) or Legal Guardian (*please print*)

and

Easterseals of SEPA
2901 Edgely Road
Levittown, PA 19057

Street Address/Box Number

Town/City

Zip Code

Child's Date of Birth: _____

II. Child(ren) Enrolled:

The parent(s)/guardian(s) agree to place the following child(ren) in the Toddler Program:

Name (*please print*): _____

III. Enrollment Schedule

The parent(s)/guardian(s) and Easter Seals agree that the Toddler Program will be available for the above named children as indicated below:

Toddler Class

Check all that apply:

☐ A.M. (7:00am to 12:00pm)

☐ Full Day (7:00 a.m. to 5:00 p.m.)

☐ Monday

☐ Tuesday

☐ Wednesday

☐ Thursday

☐ Friday

Fees and Terms:

The parent(s)/guardian(s) and Easterseals agree to the following fees (*10% sibling discount available*):

Please select desired schedule:

CLASS

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> 5 Full Days/Week*
\$880 per month | <input type="checkbox"/> 4 Full Days/Week*
\$704 per month | <input type="checkbox"/> 3 Full Days/Week*
\$528 per month | <input type="checkbox"/> 2 Full Days/Week
\$352 per month |
| <input type="checkbox"/> 5 Half Days/Week
\$440 per month | <input type="checkbox"/> 4 Half Days/Week
\$352 per month | <input type="checkbox"/> 3 Half Days/Week
\$264 per month | <input type="checkbox"/> 2 Half Days/Week
\$176 per month |

When the child is absent from the Toddler Program because of illness, vacation, or for any other reason, the parent agrees to pay Easterseals for the days indicated in the enrollment schedule, and/or any additional programs registered for, provided Easterseals services are offered during these periods. See the calendar for school closings (in the event of excessive closures due to inclement weather, make-up sessions will be offered).

Tuition will be billed in equal monthly installments. All fees will be billed monthly. Payments are due within 15 days of the invoice date. Non-compliance with this payment agreement will result in the application of a \$10.00 late fee on all payments received after the 15th day. A fee of \$25.00 will be charged for each check returned by the bank. Non-payment of fees may be cause for immediate termination without notice.

Please remit payment to: **Easterseals of Southeastern Pennsylvania**
2901 Edgely Road
Levittown, PA 19057

This contract may be terminated at any time by written notice from either party. However, a written notice of at least one month would be greatly appreciated to allow the other party to make arrangements.

IV. Certification:

The parent(s)/guardian(s) agree, without reservation, to all terms and conditions of this agreement. I/We declare that the information appearing in this agreement is exact and complete.

A new agreement must be completed whenever there is a change in the number of children enrolled, number of days enrolled, type of service requested, fees, or other relevant policies.

Parent/Legal Guardian Signature

Easterseals Division Director

Date

Date