



ENROLLMENT CONTRACT

It is my/our desire to have my/our child/children enrolled in the daycare program at **Tadpole Academy LLC**. I/we have received a copy of the **Tadpole Academy LLC**. Policy handbook. I/we have read, understand and agree to abide by the policies contained therein. I/we also understand that my/our child is being accepted on a two-week trial basis. During this time, the management will make observations and evaluations pertaining to the child's ability to adapt to the daycare surroundings and parent's/guardians responsibility in maintaining center regulations. Unless otherwise notified, the child/children will be accepted for regular enrollment. I/we further understand that if the policies outlined in this handbook were not adhered to, it would be sufficient cause for the removal of the child/children from the daycare program. I/we also agree to give a minimum of one-week notice (five full daycare days) of my/our intent to withdraw my/our child/children from the daycare program. If the one-week notice is not given, I/we agree to make full tuition/POC copay payment for the final week.

Please **initial** next to each item. We want to be sure you **understand and agree** to these policies.

_____ I/we understand that I/we must provide a completed medical form to the daycare.

_____ I/we understand that I/we must provide all needed items (diapers, wipes, season appropriate clothing, bottles, etc.) to properly care for your child/children or Tadpole Academy can suspend your child until items are supplied.

_____ I/we understand the daycare fees and/or purchase of care fees must be paid on time or can result in suspension/termination.

_____ I/we understand there will still be charges during school weeks if there is a snow day (state of emergency closings), late start or early dismissal or closing due to one of the six major holidays.

_____ I/we understand daycare payments are due at the latest on Monday at drop off. We have the option of accessing a \$50.00 non-refundable late fee and/or enforce suspension of care until your payment is made. There will also be a \$50.00 return check fee for non-sufficient funds.

_____ I/we have contracted for the hours of 7am to 6pm. Which, Purchase of Care only allows 10 hours of care during our operation hours.

_____ I/we understand the late pickup/early drop off fee is \$1.00 per minute (This also starts after 10 hours of Purchase of Care).

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

_____ I/we understand the illness exclusion policy.

_____ I/we understand that we must always have an accurate contact number to reach guardians at all times.

_____ I/we are contracting for (year round, school year only, summer only) arrangements.

_____ I/we understand the behavior policy and I/we have read and shared the daycare rules with my/our child/children.

_____ I/we understand that Purchase of Care only allows 5 absent days a month. If more are taken without authorization/communication with Tadpole Academy, it can result in termination of care.

_____ I/we understand that cash paying clients are entitled to 5 days of unpaid absences each year after the completion of 90 business days.

_____ All clients (POC/Cash Pay) are responsible for field trip fees, returned check fees, late pick up fees and all charges per your child's account.

Tadpole Academy, LLC

Parent

Date