

Media Tuition Agreement 2018-2019

I. This agreement is by and between:

Name of Parent(s) or Le	gal Guardian <i>(please print)</i>	and	Easterseals of SEPA 468 North Middletown Roac Media, PA 19063-5506	
Street Address/Box Num	nber	_		
Town/City	Zip Code	_		
Start Date:	E	End Date:		
	\Box My child will attend the 2018	Summer Session (Ju	uly/August)	
	☐ My child will not attend the 2 ⁻	018 Summer Sessio	n (July/August)	
II. Child(ren) Enrolled	:			
The parent(s)/guardian(s	s) agree to place the following child(ren) in the Preschool	Program and/or Lunch Bunch.	
Name (please print):				

III. Enrollment Schedule

The parent(s)/guardian(s) and Easterseals agree that the Preschool Program and/or Lunch Bunch will be available for the above named child(ren) as indicated below:

Preschool Class

Check all that apply:	□ A.M. (9:00 to 11:30 a.m.) □ P.M. (12:30 to 3:00 p.m.) □ Full Day (9:00 a.m. to 3:00 p.m.)				
	Monday	□ Tuesday	□ Wednesday	Thursday	□ Friday
Lunch Bunch (11:30 a.m. to	12:30 p.m.)				
Check all that apply:	□ Monday	Tuesday	□ Wednesday	Thursday	Friday
	□ Flex Option/	\$6.50/day (24 hou	Ir notice required, chil	d may attend if sp	ace is available)

Fees and Terms:

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

Please select desired schedule:

<u>CLASS</u>

 5 Full Days/Week \$706 per month 	 4 Full Days/Week \$564 per month 	 3 Full Days/Week \$423 per month 	 2 Full Days/Week \$283 per month
 5 Half Days/Week \$294 per month 	 4 Half Days/Week \$235 per month 	3 Half Days/Week \$176 per month	 2 Half Days/Week \$118 per month
LUNCH BUNCH			
 5 Days/Week \$118 per month 	□ 4 Days/Week \$94 per month	□ 3 Days/Week \$71 per month	□ 2 Days/Week \$47 per month

When the child is absent from the Preschool 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 payments are due on or before the first of each month. Non-compliance with this payment agreement will result in the application of a \$10 late fee on all payments received after the 15th day. All other fees (Flex Option and Extra Program Days) will be billed separately. Payments are due within 15 days of the invoice date. A fee of \$25 will be charged for each check returned by the bank. A late fee of \$5 will be charged for every 5 minutes past your child's pick up time. After two late pick–ups of more than 15 minutes, staff will meet with you to discuss your child's continued enrollment in the program. Non-payment of fees may be cause for immediate termination without notice.

Please remit payment to: Easterseals of Southeastern Pennsylvania 468 North Middletown Road Media, PA 19063

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

AGREEMENT

55 PA CODE CHAPTERS 3270.123 & 181(C); 3280.123 & 181(c); 3290.123 & 181(c)

NAME OF CHILD		
FEE AMOUNT	PER-DAY-WEEK	DAY PAYMENT TO BE MADE
•	as part of the day care fe	e (examples; transportation, care, meals, etc.)
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	,	
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		,
CHILD'S ARRIVAL TIME	CHILD'S DEPARTURE TIME	PERSON(S) DESIGNATED BY PARENT TO WHOM CHILD MAY BE RELEASED
LATE FEE	PER MIN-HR	
\$		
Extra services to be pro	ovided at an additional fee i	f applicable
I, the parent/guardia	in;	
received co	mplete written program	information at the time of enrollment (\$ 2270.121
3280.121,	3290.121)	information at the time of enrollment. (§ 3270.121,
reacted to us	doto the owner and a surger	
	cur or every 6 months a	itact/parental consent form information whenever at a minumum. (§ 3270.124, 3280.124, 3290.124)
·	,	
SIGNATU	RE-OPERATOR DATE	SIGNATURE-PARENT OR GUARDIAN DATE
DATE OF CHILD'S ADMISSIO	N	
and of one of ADMISSIO	"	PERIODIC REVIEW
DATE OF WITHDRAWAL		
892A		SIGNATURE-PARENT OR GUARDIAN DATE