

Media

Tuition Agreement 2019-2020

| | | | and | Fasterseals | of SEPA | |
|--|---|----------------------|--|--|----------------------|--|
| Name of Parent(s) or Legal Guardian (please print) | | | | Easterseals of SEPA 468 North Middletown Road Media, PA 19063-5506 | | |
| Street Address/Box Numbe | r | | _ | | | |
| Town/City | | Zip Code | _ | | | |
| Start Date: | | E | nd Date: | | | |
| | _ ′ | | Summer Session (July 020 Summer Session | , , | | |
| II. Child(ren) Enrolled: | | | | | | |
| The parent(s)/guardian(s) a | gree to place the | e following child(re | en) in the Preschool F | Program and/or Lu | ınch Bunch. | |
| Name (please print): | | | | | | |
| III. Enrollment Schedule | | | | | | |
| The parent(s)/guardian(s) a the above named child(ren) | | | eschool Program and/ | or Lunch Bunch w | vill be available fo | |
| 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 | n/\$6.50/day (24 h | nour notice required, c | hild may attend if | space is available) | |

| Fees and Terms: | | | | |
|---|--|--|--|-----------------------------|
| The parent(s)/guardian(s) | and Easterseals agree to | the following fees (10 | % sibling discount available): | |
| Please select desired sche | edule: | | | |
| <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 | |
| agrees to pay Easterseals | for the days indicated in services are offered durin | n the enrollment schedung these periods. See the | , vacation, or for any other reason, the pule, and/or any additional programs registhe calendar for school closings (in the evifered). | stered |
| in the application of a \$10 Program Days) will be bil charged for each check re up time. After two late pic | D late fee on all payment led separately. Paymer sturned by the bank. A la ck-ups of more than 15 | ts received after the 1shifts are due within 15 of te fee of \$5 will be chast minutes, staff will me | pliance with this payment agreement will 5th day. All other fees (Flex Option and days of the invoice date. A fee of \$25 varged for every 5 minutes past your child eet with you to discuss your child's con iate termination without notice. | Extra will be 's pick |
| Please remit payment to: | Easterseals of South 468 North Middletown Media, PA 19063 | neastern Pennsylvani n Road | a | |
| This contract may be termi month would be greatly ap | | | party. However, a written notice of at leas | st one |
| IV. Certification: | | | | |
| The parent(s)/guardian(s) information appearing in the | • | - | ditions of this agreement. I/We declare th | at the |
| A new agreement must be enrolled, type of service re | | | number of children enrolled, number of | days |
| Parent/Legal Guardian Si | ignature | Eas | sterseals Division Director | |



Date

Date

AGREEMENT

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

| NAME OF CHILD | | | | |
|-----------------------------|-----------------------------------|----------------------------------|--|----------------------|
| FEE AMOUNT | PER-DAY-WEEK | | DAY PAYMENT TO BE MADE | |
| Services to be provided | as part of the day | care fee (exam | oles; transportation, care, meals, etc.) | |
| | | | | , |
| | , | | | |
| | | | | |
| | | | | |
| CHILD'S ARRIVAL TIME | CHILD'S DEPARTURE | TIME IDE | RSON(S) DESIGNATED BY PARENT TO WHOM C | IUD MAY DE DELCACED |
| LATE FEE | PER MIN-HR | - 1186 | ASOMAS DESIGNATED OF PARENT TO WHOM C | HILD MAY BE RELEASED |
| \$ | | | | |
| Extra services to be prov | ided at an additions | al fee if applica | ible | |
| | | | | |
| | | | | |
| | | | | |
| I, the parent/guardian | , | | and a hear of the second secon | |
| received com 3280.121, 3 | iplete written pro 290.121) | gram informa | ation at the time of enrollment. (§ | 3270.121, |
| agree to upd | ate the emergend or every 6 mo | cy contact/par onths at a mir | rental consent form information would be seen to see the see t | henever (290.124) |
| | | | | |
| | | | | : |
| | | | | |
| SIGNATURE | -OPERATOR | DATE | SIGNATURE-PARENT OR GUARDIAN | DATE |
| DATE OF CHILD'S ADMISSION | | | PERIODIC REVIEW | |
| PATE OF WITHDRAWAL | | | | |
| | | SIG | NATURE-PARENT OR GUARDIAN | DATE |
| 892A | | | | CY 321 - 12/99 |