

Kulpsville

Childcare Agreement 2019-2020

This agreement is by and between: Easterseals of SEPA and Name of Parent(s) or Legal Guardian (please print) 1161 Forty Foot Road, PO Box 333 Kulpsville, PA 19443-0333 Street Address/Box Number Town/City Zip Code Phone Number **Email Address** Start Date: _____ End Date: _____ II. Child(ren) Enrolled: The parent(s)/guardian(s) agree to place the following child(ren) in the Childcare program. Name (please print): DOB: III. **Enrollment Schedule** Childcare (6:00am to 8:30am & 3:00pm to 6:00pm) - \$8.00/hour Check all that apply: ■ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday □ Friday Please indicate time of arrival and/or departure: PM AM & PM Fees and Terms: The parent(s)/guardian(s) and Easterseals agree to the following fees (10% sibling discount available): **CLASS** ☐ ½ hour per day* ☐ 1 hour per day* ☐ 1 ½ hour per day* ☐ 2 hours per day* \$20.00 per week \$40.00 per week \$60.00 per week \$80.00 per week \$80.00 per month \$160.00 per month \$240.00 per month \$320.00 per month ☐ 2 ½ hours per day* ☐ 3 hours per day* ☐ 3 ½ hours per day* ☐ 4 hours per day* \$100.00 per week \$120.00 per week \$140.00 per week \$160.00 per week \$400.00 per month \$480.00 per month \$560.00 per month \$640.00 per month ☐ 4 ½ hours per dav* ☐ 5 hours per dav* ☐ 5 ½ hours per day* ☐ 6 hours per day* \$180.00 per week \$200.00 per week \$220.00 per week \$240.00 per week

\$800.00 per month

\$720.00 per month

\$880.00 per month

\$960.00 per month

* Note: Tuition will be rounded to the nearest dollar amount on all parent invoices.

When the child is absent from childcare because of illness, vacation, or for any other reason, the parent agrees to pay Easterseals for the days indicated in the enrollment schedule. See the calendar for school closings (in the event of excessive closures due to inclement weather, make-up sessions will be offered).

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. 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 anytime you arrive more than 5 minutes past your child's pick-up time. After 2 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.

Payments can be made in the form of cash, check, or money order. Payments can also be made with your credit/debit card. VISA, MasterCard, & American Express cards are accepted.

Please remit payment to: Easterseals of Southeastern Pennsylvania

1161 Forty Foot Road, PO Box 333

Kulpsville, PA 19443-0333

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

