Parental Agreement Form

Child's Name:_____

Please check "yes" or "no" to the following statements, sign your name and return to the front desk.

	Yes	No
1. I have received the Hugs-n-Hearts or H-n-H Campus Parent Handbook.		
2. I have been informed of and understand the policies and procedures of Hugs-n-Hearts/H-n-H Campus.		
3. I am aware that I will be informed of center events and specifics through the monthly calendar and center newsletter.		
4. I have returned all enrollment forms, including a physician signed "Child's Medical Statement," as well as all other written information requested.		
5. I understand that Hugs-n-Hearts/H-n-H Campus requires all children to be fully immunized, with the exception of a medical condition that would prove to be counter intuitive.		
6. I agree that it is the responsibility of both staff and parents to keep open lines of communication regarding my child.		
7. I understand there will be ongoing written evaluations of my child's development during the year and scheduled Parent/Teacher conferences.		
8. I understand that I will be responsible for an annual filing fee at the start of each fall program.		
9. I understand that tuition payments are due on the first day of the week that my child is scheduled for attendance. If late, a late payment fee will be added to my account balance.		
10. I understand that I must give two weeks written notice to the Director if I wish to withdraw my child from Hugs-n-Hearts/H-n-H Campus or to change my child's weekly schedule. I understand that I will be responsible for two full weeks tuition if the written notice is not received before change or withdrawal.		
11. I agree that in order for Hugs-n-Hearts/H-n-H Campus to provide services or to collect payment that I may owe, I may be contacted by telephone, text message, or e-mail at any phone number/e-mail address associated with my account, including wireless telephone numbers, which could result in charges to me. Methods of contact may include pre-recorded/artificial voice messages and/or use of an automatic dialing device, as applicable by a contracted third party.		

I have read and agree to the Hugs-n-Hearts/H-n-H Campus guidelines for promotion and transitioning to the next age group. (Guidelines are located in the Hugs-n-Hearts/H-n-H Campus Parent Handbook.) Students will be provided a two week transition period prior to our summer and/or fall sessions during which time they will be visiting their new classrooms and teachers.

Parent/Guardian Signature:_____ **Date:**_____