

## Fingerprints Parental Agreement

Child's Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parents' Full Names: \_\_\_\_\_ Date of Enrollment: \_\_\_\_\_

### Please sign at the bottom stating you have read and understand each policy.

Tuition must be paid as described in the tuition section of this program statement. I understand that a place in my child's classroom has been reserved and cannot be sold to someone else. Tuition charge including holidays, illness, vacation, is due each month before the month served whether your child is present or absent. Late tuition can lead to your child being dismissed from Fingerprints Christian Preschool. I understand that all payments (including registration fees, supply fees, tuition, summer camp tuition, prepayments, etc) to Fingerprints Christian Preschool are non-refundable and nontransferable.

Tuition is due on the first day of the month. A **\$25 late fee** is assessed to the child's account if tuition is not paid by End of Business on the 5<sup>th</sup> of the month. If tuition is not received by close of business on the 5th, services will not be available on the following day, and my child's space may be filled. Should availability exist, registration and all applicable fees will be due prior to re-enrollment. I am aware that in the event that outside collections or a legal suit is necessary to enforce payment of the account, I agree to pay all collections fees (minimum of 50% above the amount owed), 5% monthly interest on any remaining balance due over 30 days late, attorneys' fees and court costs.

There is a **\$25 return check fee** for all returned checks. Service will be immediately interrupted until balance is paid in full. I understand that I will be placed on a money order basis for 6 months should there be any subsequent returned checks.

An initial registration fee of **\$175/child** is required before my child starts school.

Because space is limited and we often times have to turn families away, I understand that when I sign my child up for Stay & Play, I will be charged regardless of whether or not my child attends. Morning Stay & Play is \$10/day. Afternoon Stay & Play is \$12/day until 4:00PM and \$18/day until 5:00PM. If a child is registered until 5:00PM on all scheduled days, the cost is \$16/day.

I agree to pay **\$3 per child** per minute in late pick up fees after 2:30PM for the regular school day or as scheduled for Stay & Play. If I, or any listed emergency contact, cannot be contacted, I understand that, per state law, CPS must be contacted after 30 minutes.

Fingerprints values its relationships with families and will make all reasonable efforts to communicate special needs for its children. I understand that continued enrollment of my child is at the discretion of Fingerprints, and that my child may be de-enrolled without notice if it is in the best interest of my child, the school, or the other children in the school. I further understand that enrollment at Fingerprints is not a guarantee of academic or other success.

I agree that in the event the school closes due to inclement weather or other natural disaster, I will continue to be responsible for my tuition payments. It is our intent to stay open on all days which the school is scheduled to be open and will make every attempt to do so.

I understand that Fingerprints follows the Frisco ISD school calendar.

I understand that the following supply fees will be assessed in September and January: \$65 for five day program, \$60 for four day program, \$55 for three day program, and \$50 for two day program.

I am responsible and will pay all damages to Fingerprints Christian Preschool and all persons and property located threat caused or contributed by my child.

I indemnify Fingerprints Christian Preschool (or its representative) against any liability, cost or claim incurred by said school arising in connection with my child's use, occupancy or receipt of any materials, services or work performed or furnished by or at Fingerprints Christian Preschool.

I understand that my child will only be released to a legal guardian or someone I have pre-authorized. Proof of identification will be required of anyone picking up my child.

I understand Fingerprints uses photographs to document events and children's developmental progress. Pictures of children may be sent via email to parents or posted in the building, on the official Fingerprints website or social media. My child's picture may be used for advertising, publicity or any other lawful purpose. No child will be identified by full name.

I understand and agree that my child's picture and/or videos will be for the school's use only and will not be published for sales.

I understand that it is at the sole discretion of Fingerprints who enters or stays within the premises. Admittance may be refused, or terminated, if the person's behavior is in direct or indirect opposition to policies in place for the safety of its children and teachers.

I have been informed of the school's illness policy and understand that I will be notified to pick up my child should they become ill at school, as outlined in the parent handbook. If called about a sick child, parents should make arrangements to have the child picked up immediately. **All sick children must be picked up within 20 minutes of notifying the parent or emergency contact.**

I understand that Fingerprints is not responsible for any personal items that I, or my child, may bring to the school, and therefore will not replace anything lost or ruined while at school. **All appropriate items (nap mats, lunch boxes, backpacks, etc) must be labeled**

I have received a copy of the parent handbook and understand, and agree to, all the policies therein.

I will not hold Fingerprints Christian Preschool (or its representatives) financially responsible for sickness, accident, emergency care and or any accident during any activities.

I understand that I must provide a two week, written notice, should I withdraw from the program. If I do not stay the full two weeks, I agree to pay the tuition for those two weeks.

**By signing this document, I am agreeing that I have read and understand all policies listed above.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Director's Signature: \_\_\_\_\_ Date: \_\_\_\_\_