

Inspirations Preschool Center

Parent Contract Agreement

(parent/guardian name)

Date

I hereby agree that I have received, read, understand and agree with the rules and regulations listed in the Policy Agreement set forth by Inspirations Preschool Center.

I am requesting preschool/daycare for my child _____

My child will need care weekly for the following days and times:

Days of the Week: Monday_____ Tuesday_____ Wednesday_____ Thursday_____ Friday_____

Half Days_____ Full Days_____

This contract begins_____.

- I agree to pay _____ on the 1st school day of each month.
- I am aware the Inspirations Preschool Center charges monthly rates payable in advance.
- I understand that a returned check due to insufficient funds is considered a breach of contract and Inspirations Preschool Center reserves the right to terminate care.
- I understand I am paying to hold a spot in the Inspirations Preschool Center's program and will be charged fees regardless of days missed due to illness or holidays.
- I understand that I am responsible for any part of childcare fees not paid by CAPSLO.
- I am aware that I will be notified in writing at least 30 days in advance of any changes made by Inspirations Preschool Center.
- I understand if I want to make a change in the days of care on this contract, I must give a 2 week notice.
- I understand that I will be charged \$1 for every day I fail to sign my child in or out.
- I understand that I will be charged a late pick up fee of \$1 per minute.
- **I understand that if I want to withdrawal my child from the program I must give 1 month written notice or 1 month's tuition.** _____ (initial)
- I have received a copy of the parent handbook.
- I have received a signed copy of this contract agreement.

Parent Signature

Date

(Please make checks payable to Inspirations Preschool Center)