**PARENT CONSENT AND POLICY AGREEMENT**

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| PRINT NAME OF CHILD | DATE |
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* I agree to keep my application form up-to-date by promptly reporting any change of information.
* **I agree to pay in advance each week a tuition fee of \_\_\_\_\_\_\_. If tuition is not paid in advance (on Friday), a $10.00 late fee will be automatically added to my child’s tuition.**
* I understand my child will be not be credited with vacation days for absence due to illness or vacation unless it is a School Holiday and have not enrolled in any days that may be open. Any absence incurred above and beyond School Holidays will be paid for. Vacation days will be offered over the summer period only.
* I understand that if my account is delinquent (2 weeks), my child will be dismissed.
* All schedules will be permanent and will not vary from week to week. I understand any schedule change must be approved by the Director and needs to be made two (2) weeks in advance.
* **I understand that if my child is absent for one or more consecutive weeks without notification, my child may be dismissed and I will forfeit any prepaid tuition. I will be subject to re-enrollment fees if there is a spot available for my child.**
* **I agree to notify the Center if my child is sick or unable to attend on a scheduled day.**
* **Children who become ill may not remain at the Center. I understand that I will be contacted and will be expected to pick up my child.**
* In the event of an emergency and/or accident, I understand that I will be contacted and that the Nest Child Care & Parent Institute will not be responsible for any medical expenses that may be incurred.
* I understand that the Center will only administer prescription medication and that I will need to complete a medicine authorization form.
* I agree to see that my child does not bring toys to the Center. I understand the Center is not responsible for any article brought from home.
* I understand that all staff is carefully screened for criminal acts including abuse.
* I understand that my child must have a change of clothing that is left in the Center to be used for emergencies. All articles of clothing will be marked.
* **I understand that the Center will provide one breakfast, one lunch and one snack.**
* **I understand that my child must be brought into the Center and be signed in and will only be released to those individuals I authorize with proper identification. Each child must be signed in at time of arrival and signed out upon departure.**
* **I understand that my child will not be released to another minor.**
* I understand that my child will be permitted to play outdoors daily except during inclement weather.
* I understand that I will be contacted in case of a severe discipline problem involving my child. If, after an initial and/or follow-up conference, there is an un-resolvable problem, and the Center determines that my child cannot adjust to the program, I will be given one week’s notice for withdrawal.
* I agree to give the Center two weeks prior notice for withdrawal. Failure to do so will result in forfeiting my security deposit or prepaid tuition.
* **I understand that I may be asked to withdraw my child, from the Center due to but not limited to the following:**
	+ **Lack of or inconsistent payment record.**
	+ **Abusive or destructive behavior by my child to other persons or property.**
	+ **Tardiness upon Center’s scheduled closing time (6:00 p.m.).**
	+ **Failure by parent or child to adhere to the rules and regulations.**
* I agree to pay **$30.00** for a returned check and the Center has the option to refuse any future checks.
* I understand the Zero Tolerance Child Abuse Policy and that any evidence of physical abuse or sexual misconduct will be reported to CPS.
* I understand that the parent agreement is subject to change by the Nest Child Care & Parent Institute to comply with State regulations or for other reasons with two week’s notification.
* I understand that any child picked up after 6:00 p.m. will be charged a late fee of $1.00 per minute, per child. The late fee is due at the time of pick up and is payable to the staff on duty.
* I give the Center permission to take pictures of my child during special events.
* I understand a rest period will be provided for my child.
* I understand that the Nest Child Care & Parent Institute encourages self-independence in the bathroom for our potty-trained children.

I have read and understand the policy agreement and agree to accept the conditions stated.

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| PARENT, LEGAL GUARDIAN OR RESPONSIBLE ADULT |
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Signature Date