

LITTLE ACORN CHILDCARE AGREEMENT

I agree that _____ will be attending Little Acorn Day School or
(Child's Name)

Little Acorn Sprouts beginning ____/____/____ for the following days and times:
month day year

_____ for a monthly fee of \$_____.

(*Please Note: You must complete this form by writing anticipated drop-off and pick-up times above and let us know if things change).

I understand and agree to the following:

- I agree to pay my monthly tuition fee on or before the first day of each month.
- I agree to pay a 10% late fee for tuition paid after the fifth (5th) of each month.
- I agree to pay a \$100.00 insurance fee in February each year my child is enrolled in Little Acorn Day School and/or Little Acorn Sprouts.
- I understand that any unpaid absences or vacation will not be considered enrollment and available space may be filled. This includes leaving for the summer.
- I understand that a registration fee and tuition deposit is due at the time of enrollment, which is non-refundable and payable again upon departure and re-enrollment.
- I understand, when leaving Little Acorn, or reducing attendance days, I must give the Director at least one month notice in writing, in advance of withdrawal from the 1st of the month to the 30th of the month, or I will owe the following month's tuition.
- I have received a copy of the Parent Handbook, issued by Little Acorn, and agree to abide by the rules and regulations stated therein regarding fees, attendance, health, parking, clothing and other such items.
- I agree to notify the Director of Little Acorn of any changes in the above plan and I understand that any changes to enrollment days and hours are subject to availability.

Signature of Parent or Guardian

Signature of Child Care Provider

Date

Date