## **2023 EARLY LEARNING CENTER AGREEMENT June**

Glenshaw Presbyterian Church Early Learning Center 300 Glenn Avenue Glenshaw, Pennsylvania 15116 Telephone numbers (412) 487-5490 (412) 486-8400-Church Office Monday – Friday 7:00 AM – 5:30 PM

A safe environment where children are able to develop to their potential through the support of qualified employees.

The Early Learning Center operates Monday through Friday from 7:00 AM to 5:30 PM. Arrival and pick up times may vary. No child is permitted into the Center before 7:00 AM due to insurance reasons. We request that all children arrive each day no later than 10:00 AM for staffing purposes.

**Registration fee for new enrollment** \$65.00 for first child, \$45 for each subsequent child

| Fee scale per day:   | Part Day                         | Full Day                         | <b>Extended Day</b> |
|----------------------|----------------------------------|----------------------------------|---------------------|
|                      | $\overline{(< 5 \text{ hours})}$ | $\overline{(>=5 \text{ hours})}$ | (>9 hours)          |
| 1 Child              | \$48.80                          | \$58.58                          | \$65.10             |
| 2 Children           | \$78.10                          | \$99.24                          | \$105.75            |
| 3 Children           | \$97.63                          | \$131.78                         | \$138.31            |
| 1 Infant             | \$62.26                          | \$65.36                          | \$77.55             |
| 1 Infant, 1 Child    | \$94.93                          | \$108.94                         | \$115.16            |
| 1 Infant, 2 Children | \$119.83                         | \$136.97                         | \$143.19            |

\*If absent for any reason on a scheduled day, the following discount will be given:

Part Day Full Day

\$5/one child or family \$10/one child or family; \$5/one child off and sibling(s) present

\*Late pick up policy: The Early Learning Center does not provide service after 5:30.

1<sup>st</sup> offense the late fee is \$15.00 + \$1 per minute after 5:30.

 $2^{nd}$  offense the late fee is \$25.00 + \$1.00 per minute after 5:30.

 $3^{rd}$  offense the late fee is \$35.00 + \$1.00 per minute after 5:30.

After 3<sup>rd</sup> offense we have the right to terminate your agreement with us.

\*Schedule: Please indicate the days on which your child will attend the Center on the back of this form. These will be the only days your child will be able to attend. We do NOT offer flexible schedules. If you need to request a day off for your child, you must email the Director at <a href="mailto:fawn@glenshawchurch.org">fawn@glenshawchurch.org</a> by noon on the Tuesday of the week prior or the request will not be honored. A minimum attendance of 3 full or extended days per week is required. We offer families a maximum of 2 weeks of vacation in which a child can be taken off of the schedule for the entire week and will not be charged for that week.

If you do not sign your child both in and out on the app, you will be charged a safety fee of \$3.00 in addition to the daily fee.

\*Payment Policy: All balances are due in full on the last day of the child's week. Upon request, a balance may be carried to the end of the second week. If a family's balance exceeds \$500, children may not come to the Center for care until that balance is paid in full. We need a two-week notice for disenrollment from The Center. If you disenroll your child with an outstanding bill due to The Center, after 30 days, there will be a 1% charge added to your

| Child's NameBirth Date  |  | _            |            |            |  |  |  |  |
|---|--|--------------|------------|------------|--|--|--|--|
| Parent/Guardia  | n Signature  |              |            | Date       |  |  |  |  |
| Driver's License # State Issued:  |  |              | (required) |            |  |  |  |  |
| Email address   |  | Phone Number |            | -          |  |  |  |  |
| Parent/Guardia  | n Signature  |              |            | Date       |  |  |  |  |
| Driver's Licens   | e #  | State Issu   | ed:        | (required) |  |  |  |  |
| Email address Phone Number  |  |              |            |            |  |  |  |  |
| My child will attend (please check all that apply):   |  |              |            |            |  |  |  |  |
| Monday  | Tuesday  | Wednesday    | Thursday   | Friday     |  |  |  |  |
|   |  |              |            |            |  |  |  |  |
| Please initial additional contractual items:  I understand that it is a state policy for a child to be excluded from group care until 24 hours after they have been free of fever without medication, had last diarrhea, or vomited.  I know that it is illegal and dangerous to leave another child in the vehicle or to leave my car running while I enter the building to drop off my child.  I understand that my child may be placed in a different learning group at times. |  |              |            |            |  |  |  |  |
|   | I am aware that in order for my child to remain enrolled, I must turn in the completed day care health form with doctor signature each time my child has a well-child visit (once every 6 months and after 3 <sup>rd</sup> birthday, once a year). |              |            |            |  |  |  |  |
|   | I understand that everything my child brings into the building MUST have their first and last name on it.  |              |            |            |  |  |  |  |

bill and a 1% charge added after every 30 days until the bill is paid in full.