2022-2023



Tuition Contract

Child's Schedule		Start Date:		
Child's Name		Date of Birth		
Primary Parent's Name_		Email address		
Cell Phone: Home Phone:		Work Phone	e:	
Secondary Parent's Nam	e	Email address		
Cell Phone:	Home Phone:	Work Phone	e:	
	Contract Day	Drop Off Time	Pick Up Time	
	Monday:			
	Tuesday:			
	Wednesday:			
	Thursday:			
	Friday:			
Tuition & Payment Payment is due no	t Information later than Monday or th	ne first day of service fo	or the week:	
I prefer to be billed:	Weekly Bi-	-Weekly	Zero to Three	Weekly
I prefer to pay via:			ME	Rate
OPTION 1: Tuition Express (Automatic weekly or bi-weekly)			M-F M/W/F	\$270 \$196
			T/Th	\$135
Debit or Credit Ca	rd through Tuition Express (2.9	9%processing fee)		
Bank Account withdrawal through Tuition Express (\$1.00 per transaction)			Early Preschool M-F	\$260
OPTION 2: MyProcare (Parent will go to their account to initiate payment)			M/W/F	\$189
			T/Th	\$130
Debit or Credit Card	d (2.9% processing fee)		Droocheel	
Bank Account withdrawal (\$1.00 per transaction)			Preschool M-F	\$253
OPTION 3: In-Person Payment			M/W/F	\$182
·			T/Th	\$124
Cash or Check (\$1.	00 per week or bi-weekly)			
Amount due per sched	lule & billing cycle:			
Email address I prefer	to receive statements:			

Please see the attached fee policy for contract amounts. In the event that the primary parent is unable to pay tuition, the secondary parent must accept responsibility for tuition payments. Please be advised that the Board of Directors reserves the right to alter the contract amounts at any time. Notification of such changes will be made 30 days in advance.

Please see the program director if you receive VT or NH tuition assistance.

PI	Please review and check off each item:					
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0	I/We agree to all of the information included in the Green Mountain Children's Center's (GMCC) Parent Handbook.					
0	I/We agree to follow the GMCC <u>Payment Policy</u> . In the event that the primary parent is unable to pay tuition, the secondary parent accepts responsibility for tuition payments.					
0	I/We agree to pay the contracted amount regardless of my child's attendance to ensure my child's spot follow policies in the <u>Parent Handbook</u> regarding absences, illness, vacation, or center's closing (snow days, holiday unexpected required closings due to water, power, heat loss or covid related closure).					
0	I/We agree to abide by GMCC's <u>Illness Policy</u> . The center reserves the right to make the final decision if a child r attend or be excused from a classroom. I/We understand that children play outside daily and must be healthy ento participate.					
0	I/We agree to follow the procedures for the distribution of medication for my child as outlined in the Medicine Administration Policy .					
0	I/We agree to give GMCC two weeks written notice of withdrawal from the program. Withdrawal not in according with this policy will result in billing of one additional week of childcare.					
O I/We agree to abide by the program's arrival and departure times. (See <u>Parent Handbook for center's operation</u>). I understand that I will be charged a late fee of a dollar a minute for the first fifteen minute dollars a minute thereafter.						
0	I/We agree to keep all information in my child's file up to date including address, immunization records, health record and emergency contact information.					
0	GMCC is a nut-controlled program. I/We agree to abide by the Nut-Controlled Policy and provide my child a nut-controlled lunch. If the center needs to provide a lunch, the cost will be \$5.00 per meal.					
0	I/We understand that communication is a key to building a positive relationship between parents and staff. I/We agre to have open communication with GMCC staff.					
0	I/We agree that anytime a GMCC staff person feels verbally or physically threatened by an individual, it may be cause for termination of contract or relationship with the organization.					
0	GMCC's special programs are dependent on financial support through fundraising. There are various fundraising opportunities available throughout the year. All families are required to raise \$200 annually or donate 8 hours of volunteer time.					
0	In consideration of my child being allowed to attend Green Mountain Children's Center programs and participate in field trips and activities, I/We do hereby release GMCC and their agents from any and all responsibility and liability for injuries or illness resulting from my child attending GMCC or while participating in field trips. I/We consent to my child receiving emergency first aid, and if necessary, being transported to a hospital for emergency care. I/We agree that any and all transportation and medical care to be at my expense.					
0	GMCC reserves the right to revise its policies on an "as needed" basis. Families will be notified of any alterations when they occur from the Executive Director and/or the Board of Directors.					
Pa	ent/Guardian Signature					
	Primary Parent's Signature Director's Signature					
	Date Date					
	Secondary Parent's Signature					

Date