

Parent Copy _____
Office Copy _____



818 South King Street
Leesburg, VA 20175

571-223-6736 (Main)
571-223-6442 (Fax)

Half Day Preschool Financial Agreement 2010-2011

Child's Name: _____ Date of Birth: _____

Starting Date: _____ Class: _____ AM ____ PM ____

If changes are needed to my child's schedule, I agree to advise the Leesburg Open Arms Staff in writing.

Tuition

1. I agree to pay tuition in the amount of \$_____ per month, due the first day of the month. Payment is considered late on the 10th and a late payment fee may be assessed at \$5 per day. Tuition costs are subject to change upon notice. The final payment is due on April 1, 2011. **INITIAL** _____
2. The yearly registration fee of \$75 (one child) and \$50 (each additional child) is **non-refundable** and payable at the time of a new enrollment, should I choose to keep my child enrolled at the Leesburg Open Arms. **INITIAL** _____
3. An additional activities fee of \$50 (per child) is due at the time of registration and is **non-refundable**. The fee will be used for the upcoming school year and will cover any and all field trips and in-school shows and events. There is no additional child discount for this fee. You are welcome to attend all shows and programs on your off days. **INITIAL** _____
4. Leesburg Open Arms Preschool is in session from 9:00 AM – 12:00 PM and 12:30 PM – 3:30 PM. A late pickup fee is assessed at \$25 for the first 15 minutes past the designated closing time plus \$1 per minute after that and the fee is due at the time of pickup. **INITIAL** _____
5. A returned check from a bank is assessed a fee of \$35 for processing. If two checks are returned from the bank, future tuition is payable by cash, or money order. **INITIAL** _____
6. No refunds will be made for days missed due to illness, snow, vacation, or holidays. The full tuition is payable each month that the child is enrolled. **INITIAL** _____
7. You must provide written notice at least thirty (30) days prior to your child's last day of attendance. Failure to provide the required notice will result in monthly tuition obligations for the notice period. **INITIAL** _____

Holidays

The Leesburg Open Arms Half-Day Preschool Program follows the Loudoun County Public School calendar. We will close when the public schools are closed for holidays and all planning/records/conference days. A student calendar will be provided to you.

Snow Days

The Leesburg Open Arms Half-Day Preschool is closed when the Loudoun Public Schools close due to inclement weather. If Loudoun Public Schools are delayed one (1) or two (2) hours, the LOA Preschool will also be delayed one (1) hour. Tuition is structured to compensate for holidays and snow days, and therefore tuition credit is not provided. The full month tuition is charged for these months.

Health Assessment

A completed Commonwealth of Virginia School Entrance Health Form dated and signed by the pediatrician, must be provided to the center the first day of enrollment.

Illness

Any child with vomiting, diarrhea, or an auxiliary fever of 101° degrees, either alone or in combination with other symptoms including sore throat, cannot be brought to the center. If your child develops any of these symptoms while at the center, you will be contacted and asked to pick up your child as soon as possible. A sick child may not return to the center until 24 hours after the signs and symptoms have subsided, the fever is gone, and treatment has begun. If a child shows symptoms of a suspicious rash, sores, or discharge from the eyes, then a physician must verify the diagnosis and begin appropriate treatment. Written documentation must be provided from the child’s physician concerning the condition of the child prior to returning to the center.

Release of Child or Children

The Leesburg Open Arms maintains an Emergency Contact/Parental Consent Form. A child will not be permitted to leave the center with anyone who has not been previously given authorization by the parent/guardian.

A child will not be released to a parent/guardian or other authorized person if the staff suspects that this person may be under the influence of drugs or alcohol.

Liability

Leesburg Open Arms will not be responsible or held liable for items brought to the center that are lost, stolen, or damaged. Parents are urged to not send valuables or toys.

This Enrollment Agreement may be modified and is subject to change with notice. Please refer to the Parent Handbook for additional information on policies.

I have read the above information and agree to its terms and conditions.

Parent/Guardian Signature (1) _____ Date: _____

Printed Name: _____

Parent/Guardian Signature (2) _____ Date: _____

Printed Name: _____

Leesburg Opens Arms Authorized Signature _____