

Children's Palace Preschool & Childcare Placement & Fee Contract- Holmen, WI

Family Name: _____

There is a one-time registration fee of \$50 for each child (\$75 per family) enrolled. This fee is due on or before your start date. This fee is not credited to your account and is non-refundable. There is an annual fee of \$20 per child (\$25 per family) that is due on or before September 1st regardless of your child's start date at Children's Palace. The regular weekly fees are paid at the beginning of the week of service at the time of drop off. There is a late fee of \$25 per week per child per delinquent account. Accounts are defined as delinquent when payment is 5 days past due. If an account is 10 days past due your contract will be terminated. If 30 days past due your account will go to collections. At 30 days past due there is an additional fee of \$100. A \$25 fee will apply for checks returned for insufficient funds. All payments made with the EBT Childcare card need to be made by the 15th of each month for the entire month that is placed on the card.

When enrolling your child, you will need to pay the registration fee and the first weeks tuition to lock in your spot.

No tuition credit will be given for closed holidays: Labor Day, Thanksgiving, Christmas Eve, Christmas Day, New Year's Eve, New Year's Day, Good Friday, July 4th & Memorial Day

Vacation: Vacation time is limited to two weeks (5 consecutive work days each) The vacation fee is 50% of your tuition. You must, however, take one full week at a time. Holding fees are due in advance. After the vacation has been used the regular weekly fee will apply if more time is requested. If you terminate your child's position for the two-week vacation period and wish to reenroll a registration fee of \$100 will be charged.

Maternity Leave: The first six weeks are free! Each week after is a \$100 a week holding fee. This fee includes up to two designated days a week of care with the days approved by the director for scheduling purposes. Maternity leave rates will not exceed 12 weeks.

Illness: In the event of an extended illness, after one full week of tuition has been paid, a \$10 per day per child holding fee will apply. Doctors verification of inpatient hospitalization will waive the first week's fee and only the holding fee of \$10 per child will be applied for those 5 days.

Late Pick Up: There is a \$5 per fifteen-minute charge per child when picked up after closing time and is due immediately at the time of pick up. Children are not allowed to be in attendance for more than 12 hours per day.

Termination: Voluntary termination of the contract can be made by the director or the client given a two-week written notice. The written notice is required by the child's parent/guardian for any reason of termination. Failure to the client to comply with center policies, this contract, and/ or state requirements could result in immediate termination of this contract.

A 10% interest fee will be applied if the bill is not paid within two weeks of a non-notice termination.

Tuition Rates

- _____ Full Time: Monday-Friday, \$200 Infants-Age 2
- _____ Full Time: Monday-Friday, \$175 Age 2-3
- _____ Full Time: Monday-Friday, \$165 Age 3 & up
- _____ Three days: \$125 per week Ages 2 & Up
- _____ Two days: \$100 per week Ages 2 & Up
- _____ One day: \$55 per week Ages 2 & Up

Multiple Children

We offer a 20% discount for your second full time child and an additional 10% for each child after that. * To determine the multiple child discount it will be based on the oldest full time child's tuition. For example, one child under 1 and one over 2 the 20% comes off the 2 year olds tuition. Discounts only apply to full time children over the age of two.

Surround Care

- _____ \$75 per week both AM & PM
- _____ \$60 per week only AM or PM

*** IF your child has an early release or late start, the hourly rate will apply per child. 2-hour early release - \$20 additional for the weekly fee. If your child has a non-school day and additional \$30 fee will apply. A child in surround cares weekly tuition will not exceed the full time rate.

I acknowledge that I have read, understood and will abide by the placement and fee contract, all necessary enrollment forms and all state and center rules. I agree to pay the fees due to Children's Palace promptly each week; failure to do so will result in late fees and could involve the termination of my contract. This contract can be re-negotiated by the Director at any time.

Parent/Guardian Signature: _____ Date _____

Child Name & DOB: _____ Start Date: _____
Email Address: _____ Family Rate: _____