

**Enrollment Agreement for Currently Enrolled Ohev Children**

**2016-17**

Welcome to Federation Early Learning Services (FELS). We are committed to providing your child with a nurturing environment that facilitates his/her cognitive, social, emotional, and physical development.

Child's Name Birthdate Enrollment Date

**HOURS of SERVICE**

* The program year begins in September and ends in August each year.
* The Center’s hours of operation are 7:00 AM - 6:00 PM. All children picked up after 6:00 PM will be considered late. (See page 3– Late Pick up Policy).
* Child’s Arrival Time: Child’s Departure Time:
* My child will usually be picked up by

 (Name & relationship)

* I will notify the program if my child’s schedule changes.
* To ensure that my child arrives at his/her classroom safely, and to promote daily communication with staff, my child will be personally escorted to and from his/her classroom.
* I understand that FELS staff supervises groups of children at all times.

**FINANCIAL POLICIES**

**PLEASE NOTE THAT FEES ARE CHARGED ACCORDING TO THE CLASSROOM GROUPING, NOT THE AGE OF THE CHILD**.

* ***Private Fees***

Monthly Tuition Schedule for Center Based Full Time Care:

Infant *$1,434 •* Young Toddler *$1,195* •Older Toddler *$1,195* • Preschool *$1,195*

***Fees for Child Receiving State Subsidy***

* + Families receiving CCIS subsidy are required to pay the parent co- payment assessed by the subsidy program.
	+ Weekly co-payments are due on Monday each week of service.
* ***Sibling Discount(does not apply to CCIS)***

When more than one child is enrolled in full-time care, a discount of 5% is applied to the oldest child enrolled full time.

* ***Enrollment Date***

The date noted at the top of this agreement is your official enrollment date and will be used for all financial determinations.

* ***Payment Guidelines***Payment is due in advance of service and is required *without* regard to a child’s attendance including illness, vacations, and holiday or emergency closings. FELS reserves the right to increase fees at any time.
* ***Late Payment***Delinquent payments may result in termination of service. Private payments not received at Central Administration on the fifth working day after they are due, will result in a $25 late processing fee automatically charged to your account. Subsidized families whose co-payment is not received by 4:00 PM on Friday of the week of service will be reported to the appropriate subsidy offices as delinquent.

**Checks or Money Orders should be made payable to FELS and mailed to:**FELS, Attention: Accounts Receivable, 10700 Jamison Avenue, Philadelphia, PA 19116

Payments may also be made using Visa, MasterCard, and automatic ACH transfer or online through the Tuition Express portal. Cash is not accepted for payment toward tuition or fees at any time and centers are not permitted
to accept payments at any time. Payment are due by 5:00pm on the first of the month. Online payments must be submitted before 4:00pm to be credited that day.

I agree to pay:

* The required fee of $\_\_\_\_\_\_\_\_\_\_\_ for the following scheduled days and times of service

 Days requesting care: Monday Tuesday Wednesday Thursday Friday

 Scheduled Hours: € 9:15 AM – 1:00 PM € 9:15 AM – 3:15 PM € 7:00 AM – 6:00 PM

* My co-payment set by the CCIS office
* Fees for accident insurance, special events/trips and parents’ activities at enrollment and each following year
* $35.00 if my check is returned for insufficient funds. I understand that I may be required to pay with a money order if this re-occurs.
* The late pick-up fee as outlined in the *Lateness Policy* in Section 6.
* The appropriate Holding or Re-Enrollment fee indicated on the Summer/Fall Survey distributed each program year. I understand that these fees will be applied against my account the following November, provided my child remains enrolled through the month of October.

**HEALTH POLICIES**

I agree that:

* My child will have physical examinations and age-appropriate immunizations in accordance with the American Academy of Pediatric recommendations, which legally qualifies him/her to attend/continue in child care.
* Medication will be administered to my child in accordance with the FELS Medication Permission Policy.
* FELS has permission to administer first-aid to my child.
* If my child becomes ill during the day, I will arrange for pick up within one hour. My child will only return if able to fully participate in the program (i.e. all physical activities including swimming).
* The center will be notified when my child will be absent due to illness or medical appointments.
* I will apply sunscreen to my child before arrival at the center during summer months and will provide, label and replenish sunscreen as needed. I give FELS staff permission to apply sunscreen that is SPF 15 (or higher) and provides UVA and UVB protection.

**OTHER POLICIES**

I agree to:

* Communicate the following changes promptly to the appropriate staff member:
* Home or work address, telephone numbers and email address
* Emergency or escort information including court orders
* Time of pick-up
* When a person who is not designated on my escort list will pick up my child
* Provide lunch on a daily basis, formula, special dietary foods, bottles, training cups, diapers, wipes, bibs, crib sheets, blankets for nap, sun block and a complete change of seasonably appropriate clothing.
* Allow my child to participate in activities including swimming, wading, neighborhood walks, and visits to places of interest. I will receive advance notification of bus trips.
* Provide all information relating to special services my child is receiving (e.g. IEP, IFSP, 504-ADHD).
* Meet with staff to discuss child or family related issues; allow my child to be observed by the FELS Child Development Services staff, as needed.
* Adhere to State regulations that all parents behave appropriately toward their children, staff and other children while in the child care setting.
* Adhere to State regulations that prohibit parents and authorized escorts from entering FELS premises in a state of intoxication or bearing firearms.
* I understand that when children exhibit unsafe behaviors, they may be asked to leave the program.

**POLICY ON BABYSITTING**

I understand that Federation Early Learning Services (FELS) strongly discourages parents from hiring staff members to babysit for them. There is the potential for favoritism and confusion of roles. If parents disregard this FELS policy, they should not rely on FELS’ reputation for hiring qualified staff as an endorsement of an individual’s competence to baby-sit. Staff who accept babysitting jobs in a home setting are unsupervised and do not have the same supports that exist in FELS’ own programs. FELS does not accept responsibility for any problems related to or stemming from staff that have been hired as babysitters.

 **PUBLICITY PERMISSION**

* My child can € cannot € be photographed for publicity purposes including, but not limited to, print/ electronic media and social marketing (e.g. flyers, newsletters, FELS website, Facebook, YouTube and Vimeo video postings, etc.) purposes.
* I authorize € do not authorize€ FELS to use my written comments regarding the quality of services received for public relations purposes. FELS can € cannot € include my name.

**LATENESS POLICY**

I understand that:

* The Lateness Policy is designed to address recurring lateness and not the occasional late pickup caused by unforeseen and uncontrollable events. However, it is our intention to discourage repetitive lateness and encourage families to adhere to their pick up time.
* Late fees will be charged 5 minutes after the child’s regularly scheduled option pick up time (e.g. 1:00 pm; 3:15 pm or 6:00Pm). The Center clock is used to make this determination. Lateness will be entered in the *Late Pickup Log Book*.
* If a parent is late two times within *three weeks*, a warning letter is sent informing them that if a third lateness occurs it could result in non-admittance to the program for the child the following day.
* Repeated late pickups can result in termination of child care services. This will be determined at the discretion of the Center Director.

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|  | **1st Occurrence** | **2nd Occurrence** | **3rd Occurrence** |
| **5-15 Minutes** | $10.00 per child | $15.00 per child | $20.00 per child |
| **Per Minute, after 15 Minutes** | $1.00 per child | $5.00 per child | $5.00 per child |

My signature below indicates I understand that I am required to update the emergency contact/parental consent form information whenever changes occur or every six months.

I/We have read this agreement and understand that compliance with its contents is necessary for my child to remain enrolled.

FELS Representative: Date:

Parent or Legal Guardian: Date:

Currently Enrolled Families

7/16