



FINANCIAL AGREEMENT

This Child Care Agreement ("Agreement") is made on _____, 20____ by and between the Oakridge Early Education Center ("Oakridge E.E.C" or "center") and ("responsible party" or "parent")_____.

1. **TERM OF AGREEMENT.** This Agreement shall be effective upon the date hereof and shall continue in effect until termination pursuant and subject to the terms and conditions. Subject to the terms and conditions hereof, upon the happening of any of the following events, this Agreement is terminated:

- a. If Oakridge E.E.C elects, upon default of any payments to Oakridge E.E.C;
- b. Upon Oakridge E.E.C written notice to the responsible party, with or without cause, at any time; or
- c. Upon the responsible party's option and after at least two (2) weeks' written notice given on a Monday by 12 Midnight to Oakridge E.E.C, with or without cause; or
- d. Upon mutual written agreement between the parties to terminate the Agreement. Under any circumstances, the obligations of the responsible party if in "Default", shall survive the termination of this Agreement.

2. **METHODS OF PAYMENT.** I agree to pay my child's tuition on the Friday before drop off on the following Monday according to the weekly tuition payment schedule provided by the center. I understand that the tuition payment must be made by Tuition Express (automatic deduction) using my credit card or bank account. I agree to complete the required forms with my account information, which will remain on file in a secure location at the center. I understand that it is a requirement to complete registration with Tuition Express and authorize the automatic debit for my tuition charges on each and every Friday. If my automatic deduction fails on that Friday, I understand that I will incur a \$35 charge which will be due immediately along with the tuition charges in order for my child to attend the center that following week.

3. **WEEKLY TUITION.** I agree to pay Oakridge E.E.C, **in advance**, a weekly tuition in the amount of \$_____ during the entire term of this Agreement. I understand that there is no deduction for absences, holidays, vacations, illness, closures due to inclement weather or staff development time, which is currently one (1) full day session at the end of the summer annually. Tuition is based on a weekly rate for full-time and part-time and will not be prorated unless through written consent of the director.

4. **LATE CHARGES.** I agree that if the Weekly Tuition including any other accrued fees and charges, is not paid to Oakridge E.E.C on or before the close of business on Friday for the week for which the space is reserved for the Children, I shall pay, in addition to the Weekly Tuition and other accrued fees and charges a Late Payment fee of \$10.00 per day including the day of payment but excluding holidays and weekends. I understand that my child can be automatically withdrawn from the center if payments are not made on time.

5. **RETURNED CHECK CHARGE.** I understand and agree that if any automatic debit to Oakridge E.E.C is returned unpaid by the bank for whatever reason, the Undersigned shall pay a Returned Payment Charge of \$35.00.

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- 6. REGISTRATION FEE.** I agree to pay **in advance** to Oakridge E.E.C a nonrefundable new and annual registration fee of \$50 per child and each child thereafter. This fee is non-refundable.
- 7. ACTIVITY/MATERIAL FEES.** I agree to pay a School Year Activity/Material Fee of \$_____ for each child upon enrollment and each child thereafter. I also agree that if my child is enrolled into the Summer Camp session to pay \$_____ Activity Fee each June and thereafter.
- 8. SECURITY DEPOSIT.** I agree to pay a Security Deposit in the amount of \$_____ for each child which is equivalent to one week's tuition. This is required upon enrollment. I understand that I have up to three (3) days to cancel and receive a full refund of my security deposit. After the three days period, I agree to forfeit my security deposit in its entirety. I further understand and agree that if I fail to pay any late fees including late pick-up, tuition, or any other outstanding financial obligation, the total amount outstanding will be deducted from my Security Deposit upon withdrawal. To the extent that my financial obligation exceeds my Security Deposit, I will pay the balance in full.
- 9. ARRIVAL/DISMISSAL AND LATE PICK-UP FEE.** I understand and agree that:
- Children are not permitted at Oakridge E.E.C. before 6:30am.
 - Children must be accompanied into the Oakridge E.E.C. facility by an adult.
 - Oakridge E.E.C. shall release children only to persons listed on the Emergency Pick-Up Permission form
 - I agree to pay Oakridge E.E.C. a Late Pick-up Fee of **\$1.00 for each minute after 6:30 p.m.** that any of the Children are still remaining at the facility with no exceptions.
- 10. WITHDRAWAL.** I understand that the enrollment of my child is for a full year. This is a full year round program. However, I understand that I may withdraw my child at any time during the year by giving the center a **two-week notice**. I understand that I must complete a withdrawal form and discuss my financial status with the director to make sure I have met all of my financial obligations set forth in this agreement. **If I fail to submit my two-week notice**, I agree to pay tuition for the two-week period. Withdrawal payments are not prorated for any reason. All payments are weekly.
- 11. ENTIRE AGREEMENT.** This Agreement constitutes the entire agreement between the parties relating to the subject matter hereof, and supersedes all previous agreements and contracts between the parties hereto, both oral and written, and this Agreement may not be modified except in a writing executed by both parties.
- 12. SEVERABILITY.** The invalidity or unenforceability of any provision of this Agreement shall not affect the remaining provisions of this Agreement that are valid under the laws of this State.
- 18. GUARANTEED START AGREEMENT.** The registration fee, activity/material fees and the security deposit for all children are due as a non refundable deposit in order to be given a guaranteed start date. I understand that Oakridge E.E.C will hold a space for my child(ren) and that I will be responsible for full fees effective that date, whether or not the child(ren) is in attendance. In the event the child(ren) fail to start on the agreed upon guaranteed start date, fees will automatically be added weekly. Failure to pay these fees by 6:30 PM of

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the first Friday before the guaranteed start date, and by 6:30 PM every subsequent Friday, will constitute a forfeiture of the deposit (as explained above) as well as the child's spot in the center.

I have read and fully understand and agree to all parts of the financial agreement. I will comply with all the terms and conditions stated. Any funds not paid according to the terms of this agreement will be subject to a filing suit in Small Claims Court or advanced collections procedures. If these steps must be taken, I agree to pay all costs of collection, including legal/attorney fees and court costs. I hereby enroll my child in the Oakridge E.E.C. program. My child will begin when my registration fee, security deposit and initial tuition payment are paid in full.

Children:

"Responsible Party" or "Parent"

Signature _____
SSN _____ - _____

Signature _____
SSN _____ - _____

"Little Eggs Child Care Center"

Date: _____
Oakridge E.E.C Representative