

Dublin Community Preschool & Childcare Center

1281 Main Street, Dublin, NH 03444 (603) 563-8508

Participating Agreement for 2011-2012

Registration Information:

Child's Name: _____

Mother's Name: _____ Father's Name: _____

Mailing Address: _____

Telephone (day): _____ Telephone (eve): _____

E-Mail address: _____

Hours and Fees:

Childcare will be provided between the hours of _____ and _____ on these days of the week: _____. The rate of pay will be _____ per month. The parent/guardian agrees to submit payment to the treasurer on a timely basis.

The Parent/Guardian Agrees To:

- ❖ Pay a non-refundable \$75 registration fee.
- ❖ Complete and submit to the preschool a child health form, updated annually to age 5, an emergency information form, and a general permission form.
- ❖ Call by 8 a.m. if your child will not be coming for the day.
- ❖ Have your child dressed and ready to play upon arrival. Provide a complete change of clothing, appropriate for the weather, to be left at the preschool for use when needed.
- ❖ Provide alternate care in case of emergency for instances when the preschool is unable to care for your child without advance notice.
- ❖ Provide alternate care in case of a contagious illness or fever, and for snow days and emergency closings.
- ❖ Sign individual permission slips prior to field trips.
- ❖ Provide a healthy snack for the whole class on a rotating schedule with other parents.
- ❖ Serve as a cooperative parent by assisting the teachers and executive Board with the operation, maintenance duties, and fundraising activities to achieve the goals of the preschool as outlined in the bylaws.
- ❖ Give two week's notice if you plan to stop bringing your child.

Operating Policies:

- ❖ **Medication:** If your child requires the administration of **any** medication by the preschool staff, including prescribed medication as well as over the counter medicines, we will require **both** a written authorization signed by the parent/guardian as well as a written note from the child's licensed medical practitioner specifying the name of medication, dosage, times to be given, and for how many days. All medication must be in its **original** container, labeled with child's name and date.
- ❖ **Tuition:** Tuition is divided into ten monthly installments that will be billed on the 25th of the prior month and due by the 1st of the month.
- ❖ **Late Tuition:** A \$25 late fee will be issued to families whose tuition payments are not received by the 1st of the month and your child/children will not be able to attend school until your account is paid in full.
- ❖ **Changes to Participating Agreement:** A \$10.00 administrative fee will be charged each time a change is made to the original participating agreement. Payment is expected with the changed paperwork.
- ❖ **Pick-up:** Parents are responsible for picking up their children on time. **There is a late pickup fee of \$5.00 for every 15 minutes late.** Communication is expected.
- ❖ **Refunds:** Refunds will not be made for absences, illness, snow days or other emergency closings. Refunds will not be made for tuition that has already been paid unless two weeks notice has been given in writing to the treasurer.
- ❖ **Additional Children:** There is a discount of 10% for the second and subsequent children in a family. This discount is not applicable to additional time.
- ❖ **Additional time:** The rate for pre-approved additional time is \$ 6.50 per hour.
- ❖ **Bounced Checks:** There will be a \$25 fee applied for bounced checks; multiple occurrences will result in all future payments to be made in full in cash.
- ❖ **Behavior:** DCP reserves the right to dismiss any student due to behavior issues (see Behavioral Philosophy).
- ❖ **Switching:** Parents may not switch attendance days (bring a MWF child on Tuesday instead of Monday, etc.). If there is space available, a parent may add an additional day at the additional time rate.
- ❖ **Potty Training:** Due to state licensing guidelines, children entering our program must be toilet trained.

Parent Signature

Date Signed