



# Rainbow Early Learning Center

Infant Care- Preschool  
Enrollment Agreement  
Lic# 19794945/ 197494946

*In order for Rainbow Early Learning Center .to operate in an efficient manner, enabling us to provide the best program possible for your child, all parents must cooperate and adhere to the following policies.*

**Admission requirements:** Children must be between the ages of 6 Weeks to 6 years. They must be in good health and capable of participating in the school program.

**Hours of Operation:** Our full day program begins at 7:00 AM ending at 6:00 PM Monday thru Friday.

**Registration Fee:** A yearly registration of \$100 per child is required for all enrollees.

**Security Deposit:** A security deposit of \$165.00 is required at time of enrollment. This deposit will be credited towards your last week of tuition. This deposit may also be made in the form of 4 equal payments, with the approval of the director.

**Accidental Insurance Fee:**

A one-time accidental insurance fee of \$60.00 will be charged from all children enrolled in our program.

**Tuition:** Tuition is always payable in advance, due on the first day of your child's attendance. For Weekly payees, tuition is due on **Monday** of the week. Monthly payees must submit tuition by the **1<sup>st</sup> of the month**. **Please note that there will be no credit for any sick days and or any holidays. If you are taking a vacation, please note that you will be responsible for your tuition. You will be required to continue making the tuition payments in order to insure your child's place in school.**

\_\_\_\_ Initial

**Late Fee:** Tuition payments are **due** by **Monday** if paying **Weekly**, or by the **1<sup>st</sup>** if paying **Monthly**. All payees who have not submitted payment by the **due date** is subject to **a late fee of \$10 per day**.

\_\_\_\_ Initial

**Returned Checks:** There will be a \$25.00 Non-Sufficient Funds fee assessed for all returned checks.

\_\_\_\_ Initial

**Overtime Fees:** Please make sure to notify the school in case of an emergency, to reassure your child. If a child is picked up after the school closing time of 6:00 PM, a **late fee of \$1.00** per minute will be assessed and **payable in cash to the teacher on duty** at the time of pick up.

\_\_\_\_ Initial

**SUBSIDISED PROGRAM PARENTS: CCRC, DCFS, CALWORKS, GAIN:**

I have been notified that I will be responsible for payment for services if my eligibility is terminated or under paid by the subsidized program. \_\_\_\_\_ Initial

<b><u>Tuition Rates Weekly</u></b>	<b><u>6 weeks – 2 years</u></b>	<b><u>2 years to 6 years</u></b>
<b><u>Full Time</u></b>	<b><u>\$495</u></b>	<b><u>\$400</u></b>
<b><u>Part Time 3 Days</u></b>	<b><u>\$375</u></b>	<b><u>\$290</u></b>

**Modification Conditions:**

The school will provide the parents with a 30-calendar day written notification of any basic tuition rate change.

**Fundraiser:** There will be 2 fundraisers a year and each family is required to participate in the fund raisers.

**Termination** A two-week advanced written notice is required for a child to be withdrawn from the school program. Failure to provide proper notification will result in the forfeiture of the security deposit.

**Holidays:** We charge for all holidays. No adjustment on tuition will be made for holidays. Management reserves the right to make any adjustments to the holiday schedule as deemed necessary. A 30-day notice will be provided for all parents regarding any changes to the published holiday calendar.



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**Safety:** The safety of all children is the school's primary concern. Please make sure that you drop off your child to a member of our staff team. All children must be signed out each day. All drop off and pick ups must be done inside the school premises and not in the parking lot.

**Inspection Authority:**

The department of Social Services has the authority to interview the children or staff and or to enter the facility without prior consent or advance notification.

**Financial Information:**

Please complete this information for financial Responsibility:

This agreement is between \_\_\_\_\_ and Tampe Management Inc. dba. *Rainbow Early Learning Center* for the child (ren) \_\_\_\_\_.

We hereby agree to pay Rainbow Early Learning Center the amount of \$ \_\_\_\_\_ Per ☐ Week ☐ Month Due on ☐ Monday for weekly payees and or ☐ 1<sup>st</sup> of the month for the monthly payees.

**SUBSIDISED PROGRAM PARENTS: (CCRC, DCFS, Crystal Stairs, CalWorks, Gain)**

I have been notified that I will be responsible for all care provided by the facility. If my eligibility is terminated by the program, I will be accountable for all services provided after termination of program at the normal school rates as listed in this agreement. I will also be responsible for any underpayment that the subsidized program does not pay.

Primary:

	First Name	Last Name	Address	City	Zip	Home Tel	Work Tel
	SS #						

Secondary:

	First Name	Last Name	Address	City	Zip	Home Tel	Work Tel
	SS #						

Closest Relative information:

	First Name	Last Name	Address	City	Zip	Home Tel	Work Tel

**Arbitration Settlements:** I/We further agree to arbitrate any disputes, disagreements that may arise from the care of my child/children with our facility, in accordance with the rules and regulations of the American Arbitration Association. Financial issues may be the only exception to this rule.

- Failure to comply with any of our policies will be sufficient grounds for the school to discontinue services and forfeiture of the security deposit.
- By signing below, you indicate that you have read understood and received a copy of all of the above policies and the Rainbow Early Learning Center program and Parent Hand book.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date