

IMMANUEL LUTHERAN WEE CARE CENTER

CONTRACT FOR CARE

I/we wish to enroll my/our children in the care and educational program of Immanuel Wee Care Center's Early Childhood Program. This following is a list of conditions with regard to my child/ren's care.

1. I wish to enroll the following child(ren) on the said dates:

Child's Name: _____

Age: _____ Starting Date: _____

Child's Name: _____

Age: _____ Starting Date: _____

Child's Name: _____

Age: _____ Starting Date: _____

2. This contract will be for (circle one):

- a. 3 months (Summer Program Only)
- b. 9 months (School Year Only)
- c. 12 months (Year-round)

3. My child(ren) will be attending the following number of days (circle one):

5 4 3 2 1

Indicate days of week (circle days):

Monday Tuesday Wednesday Thursday Friday

4. My child(ren) will be attending at the following times (indicate time of day):

From: _____ To: _____

5. My weekly tuition fee will be \$_____. I know that unless I use a free day, I will be responsible for this amount each week.
6. I will receive the circled amount of free days per year, which can be used for vacation or sick days. Free days will be counted from Labor Day to the following year Labor Day. Please notify the Director when free days are being used.

FREE DAYS CHART

Days of Attendance Per Week	5	4	3	2
12 Months	14	12	10	8
9 Months	9	7	5	3
3 Months	4	3	2	1

*For example, if your child attends 4 days per week for one year or twelve months, you would earn 12 freed days. Days may not be used before they are earned.

(For Office Use Only)

7. I realize that when I have used all of the free days allotted to my child(ren) and my child(ren) are not in attendance, I will be responsible for my child(ren)'s tuition for those days.
8. I will pay my child(ren)'s tuition on a (circle one):

Weekly Bi-weekly Monthly

basis and I realize that if my payment is two weeks past my tuition schedule, my child will not be allowed to attend until I bring the balance to zero.

Signature of Parent/Guardian & Date

Signature of Parent/Guardian & Date

Signature of Director & Date