



Covesville Child Development Center

5527 Covesville Lane, PO Box 123

Covesville, Virginia 22931

Telephone (434) 245-9133

Family Contract

I hereby enroll _____ at Covesville Child Development Center (CCDC).
Days my student will attend CCDC: Monday__ Tuesday__ Wednesday__ Thursday__ Friday__

CCDC maintains staff-student ratios as required by Licensing Standards.

Please initial next to each:

_____ I agree to pay tuition of \$ _____. Tuition is due on Friday for the week ahead.

_____ I understand that there will be an advanced tuition payment which is one week's tuition due before the student starts at the Center.

_____ I understand that switching days of attendance requires a written request to the director. When approved, this day will be treated as an additional day, not a substitution day. Tuition will increase to the amount applicable.

_____ I agree to *pay the tuition even when my student is absent from CCDC* due to illness, vacation, harsh weather, all scheduled closings, or other reasons which forces CCDC to close.

_____ **I understand I am required to pay an annual enrollment fee of \$50 in the month of August for every student attending Covesville Child Development Center.**

_____ I agree to bring my student in by 9 A.M. and no later than 10 A.M. on the specified days on the contract for the student to benefit from the program. I understand that if my student does not arrive by 10 am my student will not be able to attend that day.

_____ I understand that *part-time students can be asked to withdraw* if their space is needed to accommodate a student who needs a full-time space.

_____ I understand that I am to provide nap items/bedding for my student and that these items need to be laundered each week. I understand that these items need to be marked with my student's name

_____ I understand that CCDC does not provide extra/back-up clothing items. It is my responsibility to provide and maintain, *at least one complete change of weather appropriate clothing at all times*. Such as replacing wet/ soiled clothing ASAP.

_____ **I understand that I will pick up my student by 4:59 P.M. CCDC closes at 5 P.M. and the building must be cleared by 5 P.M. Late arrival fees start at 5:00 PM.** The late fees are \$1.00 per minute, per staff member, until 5:20; then, late fees accrue at \$5 for every minute thereafter. Late fees are due and payable to each staff member who waited with your student. The clock in the downstairs classroom, located above the tuition box/ sign-in book, maintains CCDC's official time.

_____ I agree to inform the Director *in writing two weeks in advance* and to pay my account in full before withdrawing my student from CCDC. I understand that should I not give proper advance notice, with my account paid in full, I will be charged for those weeks.

- _____ I understand that *every parent who signs this contract is fully liable* for any tuition or fees that are due to CCDC, regardless of what arrangements the parents may have made between themselves as to who is to pay the charges.
- _____ I agree to *have my student picked up from CCDC if they become ill* according to the policies outlined in the Family Handbook. I will keep my student at home until they are no longer contagious, and can fully participate in all normal activities or I provide a signed doctor's note and my student meets the criteria outlined in the Family Handbook. I understand that late arrival fees or other penalties will apply if my student is not picked up in a timely manner as outlined in the Family Handbook.
- _____ I authorize CCDC to obtain *immediate medical care* if any injury or medical emergency occurs while my student is in CCDC's care. I understand that I will be contacted after emergency services are on the way. I agree not to hold CCDC responsible for accidental (unintentional) injury to my student while in the care of CCDC.
- _____ I give *permission* for my student to go on walks, and to go on field trips with prior knowledge and under the direct supervision of the CCDC staff. I also give permission for my student to be photographed and/or videotaped for educational purposes, including Facebook, HiMama, and the school calendar. *If I do not wish my student's picture to be used in electronic media I will fill out a separate form for this.*
- _____ I agree to dress my student appropriately for the weather and for active participation in CCDC's activities. Proper shoes should be worn to ensure my student's safety: *No flip-flops, open-toed sandals, clogs or crocs.* CCDC will not be held responsible for damaged clothing.
- _____ I understand that in the event that CCDC determines, in its sole discretion, that my student's behavior poses a threat to themselves, students at CCDC, or staff members, and the use of developmentally appropriate measures to promote self-discipline have proven unsuccessful, I will be contacted and shall remove my student from CCDC for the remainder of the day. Repeated requests for removal due to behavior issues could result in disenrollment. In the event that CCDC, in its sole discretion, determines that my student's behavior requires disenrollment, I will be provided with a documented history of CCDC's attempts to deal with the issue and with notice of the date of disenrollment. In the event of such disenrollment, this Agreement will be terminated, and all prepaid tuition will be proportionately refunded beginning with the month following the disenrollment. Enrollment fees are nonrefundable.
- _____ I understand that should CCDC determine that my student/parent/guardian has not adjusted to the program at CCDC, I will be contacted for a conference to discuss possible solutions to the issue. In the event that CCDC, in its sole discretion, determines that my student's needs cannot be well served by CCDC, my student shall be disenrolled. I will be provided with a documented history of CCDC's attempts to deal with the concerns and issues. In the event of such disenrollment, this Agreement will be terminated, and all prepaid tuition will be proportionately refunded beginning with the month following disenrollment. Enrollment fees are nonrefundable.
- _____ I authorize the staff of CCDC to transport my student without a carseat in the event of a disaster to the evacuation site as stated in the handbook.

Both parents / guardians must sign this contract.

I hereby certify that I have read and fully understand the above authorizations and agreements:

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Director Signature: _____ Date: _____

Tuition Rates:

3 Days/\$209.00 4 Days/\$233.00 5 Days/\$250.00

Drop In Fee for children not enrolled in CCDC Program \$45 per day

Revised June 2023