

# MILESTONES ACADEMY



## Enrollment & Agreement Form

We wish to enroll our child \_\_\_\_\_ in Milestones Academy and agree to the following terms of acceptance and admission.

1. In order to secure a place for your child, a security deposit of one month's tuition is required in advance. This payment serves as your deposit and is NON-REFUNDABLE. This deposit will be applied to your first month's tuition when your child begins.
2. A \$150 NON-REFUNDABLE registration fee is due upon enrollment and will be annual.
3. You must provide a 30 day written notice when your child is ready to leave Milestones Academy. In the event that the proper notice is not received, you will be responsible for paying the following month's tuition.
4. Tuition is due the 1<sup>st</sup> of each month.
5. There will be a 5% late fee charged after the 5<sup>th</sup> of the month.
6. If you are on vacation for any length of time, the full amount of tuition is still due.
7. If your child is out sick for any length of time, the full amount of tuition is still due.
8. Parents are responsible for any fees incurred with returned or insufficient funds checks.
9. Pick-up time is at 6:15 pm. Any child picked up after this time will be charged \$1.00 per minute thereafter.
10. A Universal Health Record and up to date immunization form is required by the State and Local Health Department. These forms must be submitted on or before the child's first day. Every year at your child's well visit, please provide us an updated copy along with updated immunizations.
11. In a medical emergency, permission is given to contact the doctor listed on the child's medical record and/or to transport the baby to the hospital for necessary treatment.
12. We have received copies of the center's policies of communicable diseases, Information to Parents, discipline, releasing of children, technology and social media, parental communication and expulsion.

*I/We have read and agree to the above terms and conditions.*

Parent/Guardian \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Contact # \_\_\_\_\_

Start Date \_\_\_\_\_ Deposit & Registration Fee \_\_\_\_\_