

# Parental Agreement Form

Child's Name \_\_\_\_\_ Class \_\_\_\_\_

**Please write in "yes" or "no" to each of the following statements, sign and date.**

I have read, understand and agree to all terms and policies in the Growing By Leaps & Bounds Parent Handbook and the procedures of the program found on www.GrowingByLB.com as a download-capable document. \_\_\_\_\_

Upon enrollment, I will subscribe to the center's blog for current information about GBLB to be sent directly to my email address. \_\_\_\_\_

I have submitted my child's Enrollment Packet and understand that an Enrollment Fee will be drafted of \$85 for the first child, and \$45 for each additional child, I acknowledge that I am required to fill out this packet again each year of enrollment which will result in a yearly re-Enrollment Fee of \$45 for each child. \_\_\_\_\_

I understand there will be a 1 week tuition deposit made the week prior to my child's start date. This fee will be refunded to me should I provide GBLB with a 2 week written notice of departure or if my child is graduating to Kindergarten. \_\_\_\_\_

I have submitted a Health Form from my child's pediatricians office stating the most recent date of exam (within 1 year) and current immunization record, as well as a Lead Test Date and Results if my child is over 12 months in age. \_\_\_\_\_  
If this response is "no", I will submit the Health Forms within two weeks. \_\_\_\_\_

I agree that it is the responsibility of both the staff at GBLB and I/we as care giver(s) to keep an open line of communication during the school year. \_\_\_\_\_

I understand that there will be periodic progress reports for my child during the school year to be passed out on a scheduled timeline based on age and/or developmental needs. \_\_\_\_\_

I understand that tuition payments are paid through Tuition Express and no checks or cash are accepted forms of payment. Weekly paying families will be processed on Fridays and due on the first day of each week. Monthly paying families will be processed on the first day of the month for the upcoming month of care. This will be the schedule unless prior arrangements have been made with the office. \_\_\_\_\_

I know that fees may be charged for outstanding balances & various other reasons covered in the Parent Handbook. \_\_\_\_\_

I understand that if my child is picked up late or dropped off early, there will be associated fees. \_\_\_\_\_

I understand that if my child becomes ill while at school, I have 1 hr to pick up my child. \_\_\_\_\_

I understand that my child may use hand sanitizer while at GBLB. Hand sanitizer will be used appropriate to the age of the child and in addition to hand washing or when washing with soap and water isn't readily available such as during outside play time. I understand that the teachers will carefully monitor the application and use of this product and will make sure that it is kept out of the reach of children and allowed to fully air dry so as to not make fluid contact with my child's eyes, nose or mouth. \_\_\_\_\_

I have provided GBLB with all written information that has been requested. \_\_\_\_\_

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*We have* \_\_\_\_\_ *scheduled to be normally dropped-off at* \_\_\_\_\_  
*and normally picked-up at* \_\_\_\_\_ *If this is correct, please initial here:* \_\_\_\_\_

*sign:* \_\_\_\_\_

*date:* \_\_\_\_\_