MOUNT OLYMPUS
CHRISTIAN CHILD DEVELOPMENT CENTER

Financial Agreement and Contract

PARENT/GUARDIAN INFORMATION:

Parent/Guardian 1 _____Driver's License #_____

Address: _____Zip _____

Home Number: _____ Cell Number: _____

Email: _____ Cell Provider: _____

Parent/Guardian 2 _____Driver's License#_____

Address: _____Zip _____

Home Number: _____ Cell Number: _____

Email: _____ Cell Provider: _____

Child's name: _____ Tuition $_____

Child's name: _____ Tuition $_____

Mt. Olympus prides itself on its low child-to-teacher ratios and its professional staff. To provide high-quality childcare, we must be able to keep a steady budget to pay our staff wages, benefits, and holidays. The following financial requirements are in place to ensure that MOCCDC has the budget to maintain this level of care:

- To secure my child's spot, I agree to pay a 50% tuition deposit that will be applied to the first month's tuition. This amount is due within seven days of accepting a spot:
  Depsoit $_____
- I agree to pay an enrollment fee of $200.00 per child
- I agree to pay the full monthly tuition as stated in the parent handbook

***See other side**

Materials and Supplies: To provide high-quality equipment and educational materials, MOCCDC charges a non-refundable bi-annual materials fee. This will be added to your account in March and September.
I agree to pay an annual material and supply fee of $200.00 per child.

Tuition: All tuition is to be paid in advance of services, due on the first of the month. There will be a tuition increase implemented annually, usually between 5-8%. MOCCDC will give a thirty-day notice of this. At that time, clients may accept the new terms or give a thirty-day notice to withdraw the child.

Absences: If my child is absent, on vacation, or the center is closed for holidays, I understand that MOCCDC charges a flat monthly tuition. No refunds, discounts, or make-up days will be credited.

Closures: If MOCCDC needs to close for unforeseen events or emergencies (ex: illness, weather, or natural disasters), no refunds, discounts, or make-up days will be credited.

Holidays: MOCCDC is closed for federal and state holidays, Good Friday, and between Christmas Eve until January 2nd.

Part-time: If my child is attending part-time, I may not change days without first discussing it with the director. If my child attends more than 3 days/25 hours per week, I agree to pay the full-time rate for his or her classroom.

Payment: Tuition is due on the first of each month. Tuition not received by the 10th will receive an automatic late fee of $25.00. Tuition that is still not paid by the 20th will be charged an additional late fee of $25.00. **Unpaid tuition may result in the suspension of childcare services.**

Credit Card Fees: If I choose to pay with a credit card, I understand there will a 3% processing fee added to my total monthly tuition

Returned Checks and Payments: All returned checks and payments will be subject to a $35 service fee.

Withdrawing my Child: I agree to give a thirty-day written notice to the director if I wish to withdraw my child from MOCCDC. If I fail to give thirty days' notice, I agree to pay the full tuition for the next thirty days so MOCCDC can maintain its budget and fill my child's spot.

Late Pick-Up: If my child is at MOCCDC past closing (6:00 pm) I agree to pay $5.00 for the first minute and $1.00 every minute thereafter per child. These fees will automatically be billed to your account.

Divorce: If the parents are separated or divorced, the parent or guardian signing this document is financially responsible for the entire amount. Any arrangements made between the parents for childcare payments must be made outside of MOCCDC. MOCCDC will not get involved in domestic disputes.

Collections: In the event payment under this agreement is not made at the time and in the manner required, the undersigned agrees to pay all costs of collection, including attorney fees, court costs, and collection agency fees, which would be 35% of the balance assigned, with or without suit.

MOCCDC reserves the right to refuse services.

I agree to the above terms and wish to enroll my child/children.

_____

Parent/Guardian 1 Signature Date

_____

Parent/Guardian 2 Signature Date