



# OUR SAVIOR EARLY LEARNING CENTER

## Parent Agreement

(Please initial and sign where indicated)

Child's name: \_\_\_\_\_

\_\_\_\_\_ Tuition payment is due by Monday of each week, or the first day of attendance. If tuition is not paid for two (2) consecutive weeks, your child will be unable to return to our savior early learning center until the account is paid in full.

\_\_\_\_\_ Tuition rates are subject to change at any time. Our savior early learning center will provide a two week notice of any changes.

\_\_\_\_\_ Our savior early learning center requires a two (2) week written notice if you choose to remove your child from care, The full tuition is due during these two weeks.

\_\_\_\_\_ Children will not be permitted to enter or leave the center without being escorted by an authorized person.

\_\_\_\_\_ I acknowledge that it is my responsibility to keep my child's record current, to reflect significant changes as they occur, such as: telephone numbers, emergency contacts, physician, immunization records etc.

\_\_\_\_\_ I hereby grant permission for my child to use all OSELc play equipment and participate in all of the activities of the school.

\_\_\_\_\_ I hereby grant permission for my child to be included in neighborhood walks under teachersupervision.

\_\_\_\_\_ I hereby grant permission for my child to be included in photos or news releases connected with oselc.

\_\_\_\_\_ I hereby grant permission for my child's photo to be used on the oselc website. (Names will never be published).

\_\_\_\_\_ I hereby grant permission for my child's telephone number to be released for a classroom list. Phone numbers will never be released to the public.

Parent signature: \_\_\_\_\_ Date: \_\_\_\_\_