

2024-25 Academic Year



This contract is between:

Precious Years Learning Center, Ltd.
 5906 Springdale Road, Cincinnati, Ohio 45247



["the School"]
 & the Signee below

_____ parent/guardian legal name
 _____ mailing address
 _____ city, state, zip
 _____ email address

entered into this date, ____/____/____ for the duration of the 2024-25 school year beginning on **August 19, 2024** through **May 23, 2025**, made binding by the receipt of my registration

fee of **\$100** paid via ____ cash ____ check [#_____] ____ PayPal ____ credit card payment

[Registration fees are per year, per family & non-refundable.]

Your contractual weekly rate is.....\$

_____ First Child's Legal Name [Nickname, Goes by....] _____ Date of Birth
 Please Check Days of Attendance Requested: M__ T__ W__ Th__ F__

_____ Second Child's Legal Name [Nickname, Goes by....] _____ Date of Birth
 Please Check Days of Attendance Requested: M__ T__ W__ Th__ F__

_____ Third Child's Legal Name [Nickname, Goes by....] _____ Date of Birth
 Please Check Days of Attendance Requested: M__ T__ W__ Th__ F__



By signing below, you are indicating your understanding of your contractual agreement



- *Tuition is due the beginning of each week
- *The School's Code of Conduct must be adhered to at all times
- *Changes to the Release List can only be made by a parent or guardian
- *You are entitled to 2 vacation days [coupons] for each day enrolled
- *Illness, holidays, inclement weather, and any other absences are paid tuition days unless redeeming vacation
- *I have reviewed and understand the School's policies, procedures and Code of Conduct
- *If enrolling after January 1, I understand I will only be entitled to 1 vacation day per day enrolled
- *Changing this contract may require a \$25 contract change fee
- *Changing my child's schedule is only an option if space is available AND is approved by management
- *I may cancel this contract by submitting my request in writing with a 2 week written notice of which tuition coupons cannot be redeemed
- *VACATION COUPONS WILL NOT BE REISSUED IF LOST, CANNOT BE TRANSFERRED & HAVE NO CASH VALUE PAST THE CONTRACTED DATE ABOVE.

X
 _____ Parent/Guardian Signature _____ date _____ Program Representative Signature of Acceptance

2024-25 Tuition Rates	2 days.... \$ 88
	3 days.... \$ 132
	4 days.... \$ 176
	5 days....\$ 220

Parent Portal Access to Handbook & Emergency Response Plan

User Name: _____
 Passcode: _____

RELEASE POLICY

At the end of class or the end of the day, students will **only** be released to a parent, guardian, or other authorized person listed on the release form. The school reserves the right to request picture identification of anyone picking up a child. **The school also reserves the right to withhold the release of any child if proper identification cannot be shown or verified.** We will always withhold the release of any child to **anyone suspected of driving under the influence or anyone displaying an inability to safely operate a motor vehicle.**

If you or someone authorized to pick up your child needs assistance due to special needs or circumstances, please notify us so that accommodations can be made.

It is extremely important that your child be picked up on time each day. Late pickup charges will be imposed at the rate of **\$2 per minute** past pickup time 5:00pm and are payable to the employee who stayed with your child/children. Late fees not paid to employees will be added to your tuition account balance.

RELEASE AUTHORIZATIONS

My child **may be released** to the following individuals:
(It is not necessary to list parents or legal guardians)

Name of adult 18 years or older	Relationship to Child	Child refers to as...
Name of adult 18 years or older	Relationship to Child	Child refers to as...
Name of adult 18 years or older	Relationship to Child	Child refers to as...
Name of adult 18 years or older	Relationship to Child	Child refers to as...
Name of adult 18 years or older	Relationship to Child	Child refers to as...
Name of adult 18 years or older	Relationship to Child	Child refers to as...

****NON-RELEASE STATEMENT****

My child may NOT, under any circumstances, be released to:

Name of adult 18 years or older	Relationship to Child	Child refers to as....
---------------------------------	-----------------------	------------------------

Due to the following circumstances: _____ **Note:**** Any non-custodial parent who is excluded from pickup will not be allowed to gain entry. In order to withhold a parent's right to see their child, **the custodial parent or guardian MUST provide the most recent copy of any custody agreement to be kept in the child's file while attending school.** **



By signing, I authorize the above people to pick up my child and hold harmless Precious Years Learning Center, Ltd. from any liability arising from the above-named individuals have control, custody and care of my child. I further agree to provide the school with any court papers proving denial of custody to a non-custodial parent in order to exclude said parent from control, custody and care of my child. I FURTHER UNDERSTAND that anyone listed on the release list will be made aware of and adhere to the school's supervision policy and the code of conduct policy.

Signature of Parent/Guardian X Date ____/____/____