The Cub's Den

Penn State Fayette Campus
PO Box 519
Uniontown, PA 15401
724-430-4185

REGISTRATION

Child's Full Name _____

Birth date _____

Nickname _____

Home Address _____

Home Phone_____

Mother's Name_____

Occupation _____

Place of employment _____

Work Phone _____

Cell phone or Beeper _____

Father's Name _____

Occupation _____

Place of employment _____

Work Phone_____

Cell phone or Beeper _____

Parents are: Married / Divorced / Separated / Single

Parent/Guardian with legal custody: _____

Emergency Contact Persons: (name/relationship/telephone #'s)

1. _____

2. _____

3. _____

Persons to Whom Child May be Released: (name/relationship/address/telephone #'s)

1. _____

2. _____

3. _____

Name of Child's Physician: _____

Physician's Address & Telephone Number: _____

Health Insurance Coverage Name: _____

Policy #: _____

Special Disabilities/Allergies/Dietary Information:_____

_____

I GIVE PARENTAL CONSENT FOR MY CHILD TO OBTAIN EMERGENCY MEDICAL CARE AS WELL AS THE TRAINED STAFF TO ADMINISTER MINOR FIRST-AID PROCEDURES.

_____ _____

1st Review-Parent Signature Date

_____ _____

2nd Review-Parent Signature Date

TUITION & AGREEMENT CONTRACT

DAYS OF ATTENDANCE

DAY	DROP-OFF-TIME	PICK-UP TIME
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Please notify the staff of any changes in drop-off times in advance. Failure to do so may result in our inability to meet the schedule changes that you require.

Tuition payments are made on a bi-weekly or monthly basis. Payments are made at the *beginning* of each week or month. Rates are subject to change with a 30-day notice. There is a $25.00 non-refundable registration fee. A one-week deposit is due at the time of registration.

The Cub's Den does not permit flexible scheduling or switching days that are missed. This is not possible when we must abide by a certain staff-child ratio. Also if you would like to change your child's weekly schedule, you must give the director a 2-week written notice and it will depend upon availability.

A PAYMENT OF $_____WILL BE DUE THE BEGINNING OF EACH WEEK.

REGISTRATION FEE	**$25.00**
ONE WEEK DEPOSIT	**$**
TOTAL	**$**
DATE REGISTRATION PAID	**/updated**
DATE DEPOSIT PAID	**/updated**
DATE OF ENROLLMENT	
DATE OF WITHDRAWAL	

Registration Fee and Payment Schedules:
A one-week deposit, which will be credited on your child's last week of attendance, along with an annual $25.00 non-refundable registration fee is required at the time of registration. Parents are responsible for payments on a bi-weekly or monthly basis. A late fee of $10.00 will be added to balances not paid by Friday. If the fee isn't paid by Monday morning of the next week, your child will not be permitted to attend until the outstanding balance is paid. Continued late payments will result in termination of our contract. There is no reduction of fees due to the absence of a child. Should payment not be made for the scheduled week, the parent forfeits the one-week deposit and due payments must be made before a child can return to school. There is a $6.00 processing fee for all returned checks. If two checks bounce in a year's time, cash payments will be required. The current rates are subject to change. A 30-day notice will be provided prior to a change in daycare fees. The Center reserves the right to increase fees should a child require additional staff support in order to participate in the daily program.

Arrival and Departure Procedures:
When dropping off or picking up children, parents must turn off their engine and remove keys from the ignition. An adult must walk into the building with the child. Older siblings may not bring in or pick up children. No one other than the parents or designated person will be allowed to pick up your child without prior arrangement. I must be notified in advance and have a written note with the person's name and relationship to the child. If there is a court order keeping one parent away from the child, I must have a written note from the custodial parent in my file to that effect. Otherwise, I cannot prevent the non-custodial parent from picking up the child.

Authorized Pick Up: Listed on the front of this contract.

Overtime Fees:
Parents are expected to pick up their child before 5:00 p.m. After 5:00, you will owe $1.00 per minute/per child/per teacher, which is due upon arrival. If you fail to pay the teacher(s) directly, the amount will automatically be added to your account. Please note that there must be two teachers on site at all times.

Health Matters:
Please do not bring your child if he/she is sick with the following: fever, rash, excessive cold and/or cough, diarrhea, or vomiting in the previous 24-hour period. Children with communicable diseases such as: chicken pox, rosella, conjunctivitis, mumps, measles, influenza, etc. will not be permitted to attend school and will need a physician's note to return to school. Children too sick to participate in the program, including outside activity, should be kept at home. If a child becomes ill during daycare hours, parents will be contacted immediately to remove their child within 1 hour of being notified. If parents are not available, the emergency contact person will be notified.

Medication/Sunscreen:
Medication cannot be administered without written consent and instructions from the child's physician. All medicine must be in the original container with the child's name,

dose, and times it is to be administered. You also must sign-in on the daily medication log. We will supply SPF 50 hypoallergenic sunscreen when outside for longer periods of time.

Permission to Photograph/Video: Periodically, my child's picture or video footage may be taken for publication in the newspaper, Duck Hollow's website, brochures, & flyers. I give permission for all of the above.

Medical Emergencies:
In case of a serious accident or sudden illness requiring medical attention, the following procedures are followed:
1) A phone call is made to 911
2) Child's parents or emergency contacts are called.
3) Child and health records are taken to emergency service at Uniontown Hospital.
4) In all cases, an emergency report is completed and a copy given to parents as well as the Dept. of Public Welfare.

* Parents will be responsible for all costs involved in emergency medical treatment, including emergency transportation if required.

Trial Period and Termination:
A period of 2 weeks trial is given for adjustment. After this time period the director may decide to terminate care without prior notice. If it is found that the child of parent is unable to adjust to the program provided by the Center, the director reserves the right to request the withdrawal of the child.

Withdrawal Procedures:
The director is to be notified in writing TWO WEEKS in advance, before a child is to be withdrawn. Parents are required to pay for those two weeks regardless of when the child leaves the Center. The director is also to be notified TWO WEEKS in advance of a child's permanent schedule change and will be honored if availability permits. A child that leaves the center for any amount of time and returns is subject to an additional registration fee.

Damage to Property or Equipment:
Parents are held responsible for Center property or equipment damaged by their child. The center does not assume any responsibility for lost jewelry or broken toys that belong to the children. Dangerous items or toys for pretend violence are not permitted in the Center.

I HAVE REVIEWED THIS CONTRACT WITH THE DIRECTOR AND I AGREE TO ABIDE BY ALL OF THE PROCEDURES AND CONDITIONS THAT ARE STATED IN THIS AGREEMENT AND TUITION CONTRACT.

Signature of Parent _____ Date: _____

Signature of Parent/Review _____ Date: _____

Signature of Director _____ Date: _____