

LLC Summer Camp 2018 Parent Agreement

1. I agree to pay a **non-refundable registration fee** for summer 2018.
2. I agree to replace with cash any returned checks plus the returned check fee within 24 hours of notice. The returned check fee rate is contingent on whether you notify us of the returned check before our bank notifies us. The school has the option to require future payments in cash. I agree to pay collection costs necessary to collect unpaid balances. Legal maximum collection charges will apply.
3. **Advance payment of tuition is required. Tuition is due by 25th of the month as follows: May & June (Due 4/25), July (Due 5/25) and August (Due 6/25).** Late fees will be assessed on any tuition not paid by noon on the 1st business day of the month. A late fee in the amount of 10% of the balance will be assessed at noon on the 1st. Adherence to this policy will prevent disruption of educational services. If your account is not brought current within one week, services will be suspended until the balance is paid in full.
4. **Your Full time Camper may attend a maximum of 10 hours per day. Additional time will be considered late pickup and charged accordingly. Day Campers (8:30-2:15) picked up late will be assessed late charges.** I agree to pay the **late fee per child of \$5.00 per 5 minute increment** if my child is present after scheduled pick-up time. Late pickup fees after 6:00 pm are paid at that time directly to the staff member on site, to compensate them for their overtime.
5. If considered to be in the best interest of the School, I understand the **School may suspend or dismiss my child.** Refunds will only be given based on the above policies.
6. I will provide the **required health forms** for my child upon enrollment and will update them as required. I understand my child may not attend school without a valid health form and I am responsible for tuition fees during this absence.
7. I understand my child may not attend school when the child is suspected of being in a **contagious state** as defined in the Parent Manual. I agree to remove my child from school immediately upon notification of said condition. Children not removed within one hour of notification will be charged late pick up fees. Children sent home in a contagious state must be symptom free for 24 hours and may not return the following day at a minimum.
8. I understand medication will only be given to my child when the **proper authorization** form is completed daily for the time specified by the School. **Prescription medications** must be in original containers with prescription label and must be prescribed for my child. Sample medications from doctors must be accompanied by written prescription from the doctor. Dosages must coincide with label unless doctor's note specifies differently for both prescription and over the counter medicine. We will not administer any medication that is a fever reducer. Medicine **MUST** be placed in our medicine bin and **MAY NOT** be within reach of the child, or in the child's cubbie or school bag.
9. I agree to notify the school immediately of any **changes of address, phone numbers, email address, places of employment, medical conditions, or custody issues.**
10. I will label all my child's belongings and will not hold the School responsible for lost or damaged items. **I understand I should not send in items of special value or toys.**
11. I am aware school policy mandates well fitting, closed toed shoes.
12. **I am aware the Camp Day begins at 8:30 AM.** Children who arrive more than 15 minutes late without a (prior) excused tardy may be turned away for the day. Students enrolled in the Early Riser Program must

be in attendance prior to 8:00 AM to be included in Breakfast. Children who arrive more than 5 minutes early will automatically be charged Early Riser fees.

13. I understand and agree to the use of **redirection, positive reinforcement, and reflection time** as the School's method of behavior management.
14. I hereby grant permission for my child to use all the playground equipment and participate in all activities of the School. I verify **I have personally inspected the playground** and agree to periodically re-inspect said equipment.
15. I hereby grant permission for my child to be included in **evaluations and pictures** connected with the School's program.
16. The School is required by law to **report suspicion of child abuse or neglect**.
17. I will not hold the School or its employees liable for **incidents beyond their control**. I am **responsible for my child's medical expenses** incurred as a result of injuries or illnesses. All accidents and incidents will be documented and require your signature.
18. I hereby grant permission for the staff to take whatever steps necessary to obtain **emergency medical care for my child**. These steps may include, but are not limited to the following:
 - a. Attempt to contact parent or guardian.
 - b. Attempt to contact persons authorized on registration form.
 - c. If the above is unsuccessful, the school may do any or all of the following:
 1. Call a physician or paramedic.
 2. Call an ambulance and allow the child to be transported to nearest available hospital.
19. All expenses incurred under part c will be borne by the child's family.
20. The physician and/or medical facility are authorized to administer medical treatment necessary to assure the health and safety of my child.
21. I understand that my child may have the opportunity to participate in Lutz Learning Center Field Trips away from school premises and give permission for my child to be included. I understand that information regarding Field Trip scheduling and locations will be made available on the LLC App and that it is my responsibility to check the App and sign the permission electronically for each Field Trip scheduled to allow my child to attend. Transportation will be provided by School owned and insured vehicles equipped with appropriate safety equipment. I am aware Field Trips are a privilege earned through exemplary behavior at school. We expect all children will earn that privilege, however, if your child will be excluded from a Field Trip, you will be informed prior to the day of the trip.
22. I am aware of the School's drop off and pick up policy. I will sign my child in and out daily using the school's computer kiosk and will escort them to class, personally making eye contact with my child's teacher. I will not leave my vehicle running in the parking lot, nor will I leave children in the vehicle unattended. I understand my child is not to leave our building unsupervised by an adult. I agree to notify the School on days my child will be picked up by anyone other than the customary pickup person/s.

Bug Spray Authorization:

Yes, I agree to bring in Bug Spray for my child and authorize Lutz Learning Center to use my child's spray when appropriate. I agree to only bring in the repellent in spray form, not lotion, and will label it with my child's name. I am aware Bug Spray is only applied in the afternoon as needed and will spray my child when necessary in the morning.