



Robins Nest Learning Center

Contract Agreement

(Sign & Fill-Out with Director)

Date filled out: _____

Date contract becomes effective: _____ (Starts the Monday after receipt)

I agree that my child/children _____

will be enrolled at Robin's Nest Learning Center for _____ days per week. The days I have reserved are _____

Varied or Drop-In --- circle if applicable.

Any other days not noted here will be billed at a drop-in rate of _____

CCAP parents: these are the rates you will be charged for days not covered by CCAP.

CCAP allows for 3 absences per month and then you will be billed private pay rates.

The hours of care I need are

I understand anything outside these hours will add an additional fee as outlined in our drop in rates.

My weekly tuition is _____ due the first day my child attends Robin's Nest to avoid the 20.00 per week late fee. Tuition per day is _____.

My transportation fee is _____.

The total weekly amount due on Monday is _____.

In the event there is no school and your child is school aged, you would add _____ to the weekly amount on the Monday of the week the full day is used.

Any variance of the scheduled times and days needed as outlined in this contract need to be submitted two-weeks in advance in writing in the tuition box to avoid drop in fees. This would include: switching days, vacation requests, termination of contracts, change of days or times & transportation needs outside of agreed school runs. Please note these requests

are based on staff availability and current ratios. Robin's Nest is very full and we do our best to accommodate schedule requests with proper planning.

A two-week notice is required to change and or terminate care. If no notice is given, the deposit of _____ will be forfeited and any outstanding balance is subject to the weekly late fee until balance is paid or a written payment plan is signed. In the event this account goes to collections, there is a \$150.00 collection fee that will be added and the account will go to collections and court for resolution. The deposit left here will be you last week of tuition with a two-week written notice.

All notices, changes take effect the Monday they are received.

Please email any and all changes to: moore42601@gmail.com

If this form has been signed to hold a spot, a deposit of the total weekly amount is required and is non-refundable.

_____, I agree with Robins Nest contract agreement.

Parent/ Guardian Name:

_____ Date: _____

Parent/ Guardian Signature: _____ Date: _____

Director Signature: _____ Date: _____

Change of Classroom: _____

Change of Days: _____ Change of Times: _____ - _____

Classroom Name: _____

Lead Teacher's Name: _____

*(This contract cannot be filed without a \$50 enrollment fee and signature from a director.
Any other days will be billed at drop-in rate.)*