

**ENROLLMENT:
TUITION AGREEMENT**
Program Year: _____

1259 Linda Vista Ave
Pasadena, CA 91103
(626) 449-0985



Child's Name: _____

Room Assignment: _____ Effective Date: _____ Days Per Week: _____

Parent #1: _____ Parent #2: _____

Driver's License: _____ Driver's License: _____

Parent Payment Amount: \$ _____

Agency (_____) Payment Amount: \$ _____

Scholarship Amount: \$ _____

Mark Your Calendar!

Tuition is due by the **1st** of each month; or you may pay in two installments on the **1st** and the **15th**.

Tuition Total: \$ _____

**LVCC reserves the right to increase tuition rates at any time with a 30-day notice.*

TUITION and FEE POLICIES

Linda Vista Children's Center's operating budget is based on the fees spread out over a 52-week year. Our costs do not change monthly; we have the same staff salaries and overhead costs to meet. Therefore, **there is no tuition credit (or substituting) for sick days, holidays, or vacation.**

• ***Registration/Enrollment***

Registration is arranged with the Director in an interview with the parent. A ***non-refundable*** \$50.00

application fee is required for enrollment. When a space is offered, a non-refundable Tuition Deposit in the amount of \$500.00 per child is required to guarantee the space. \$250.00 will be applied to your first month's tuition. The remaining \$250.00 is a New Family Enrollment Fee. A space will not be guaranteed until the Tuition Deposit is received.

• ***Tuition Payment***

Payment may be made by check or direct payment. Receipts will be issued on request, usually around the end of the month. Families will not receive a bill unless their payment is late. Tuition payments can be put in the "tuition mailbox" which is located by the back door of the main office.

• ***Returned Check Policy***

Should a check be returned for insufficient funds, an additional charge of \$30.00 shall be due upon presentation of payment. Payment of all returned checks must be paid in cashier's

check or money order. **Upon receiving notice of a second returned check within 12 months, tuition must be paid in cashier's check, or money order for the succeeding six months.**

- ***Tuition Late Fee***

If payment is more than five days late, a fee of \$30.00 will be charged to your account.

Enrollment may be terminated if tuition payments are more than one-month

delinquent. You are encouraged to discuss anticipated financial problems with the Director before the payment due date.

Note: Parents are responsible for timely payment, regardless of any "Flex Plan" payment cycle. Participation in such a plan is an individual family's choice for which the Center cannot be expected to bear the financial burden.

- ***Tuition Assistance***

The Center's overall goal in offering tuition assistance is to provide help to those who need it most.

Funds for tuition assistance are limited and can only be offered on the basis of availability.

Parents are expected to contribute towards tuition to the extent they are able. Assistance is offered for a specified period of time and is subject to review at the end of that period.

Together with parents, we will explore all available private and public avenues of assistance before recommending Children's Center assistance. The following factors will be considered: income and expenses, amount of savings, and number of dependents. Tuition assistance will be awarded to families without regard to race, religion, national or ethnic origin, gender, or sexual orientation. Applications are available from the Director.

- ***Termination***

If we become concerned about a child's behavior, if a child repeatedly disrupts the flow of the class routine, or consistently seems overly angry or hostile, a conference with the family may be scheduled. This allows both the parents and the teachers to search the underlying causes of his or her behavior. A "Behavior Plan" will be developed by the staff and parents to help support the child. It may be recommended that a referral for a specialist, with parental consent, be brought in to help resolve the problem. This may result in an additional cost to the parents. If the problem behavior cannot be resolved to both the parents' and Center's satisfaction, termination may be necessary.

Should a family initiate termination of continued enrollment at the center, we require a 30-day notice in writing. Therefore, regardless if the child continues to attend or not, the family will be financially responsible for a minimum of 1 month's tuition from the time when the notice is received.

It is important that all parents review the Parent Handbook to understand the policies and procedures of the center. Parents' non-support of or non-adherence to Children's Center policies may be cause for dismissal.

- ***Rights of The Agency***

Community Care Licensing has the authority to interview children or staff **without prior parental consent.** Community Care Licensing also has the authority to observe the physical condition of the child(ren), including conditions that could indicate abuse, neglect or inappropriate placement.

All center employees are “Mandated Child Abuse Reporters.” A Mandated Reporter is **legally required** to report if they know of or have “Reasonable Suspicion” of child abuse and neglect, encountered in the scope of their employment. Employers of Mandated Reporters are required to inform them of their responsibilities. (Penal Code 11166[a])

ACTIVITY FEE

The Activity Fee covers the cost of special activities such as Snow Day, annual visit by the Cabrillo Museum, holiday lunches, family picnics, and teacher appreciation week.

- **Health & Safety Fee (Included in the yearly Activity Fee)** includes the premium for School Time Insurance, and it offsets a portion of the staff’s CPR training and the purchase of disaster supplies.
- **Refund of Fee**
Withdrawal from the Children’s Center or reduction/increase of the number of days per week enrolled requires **30-day notice** to the Office (just informing your child’s Lead Teacher is not sufficient). The notice must be in writing. If less notice is given, tuition will be charged as follows: tuition for one month, minus the number of days (if any) for which the notice was given.
- **Late Pick-up Charges**
 - \$5.00 for *any fraction* of the first 5 minutes, plus
 - \$1.00 per minute thereafter.Pick-up fees are charged per child and will be added to your tuition.
- **Tuition Increases**
A 30-day advance notice will be given when tuition increases are made.

- **Parent Participation Plan**

I chose the following plan for fulfillment of my parent participation obligations. (See Parent Handbook)

Plan A (Fundraiser/Volunteer)

Plan B (Leadership)

Plan C (Buy-Out)

The undersigned acknowledges that he/she has read the above Tuition and Fee Policies and understands and agrees to the terms and conditions of this Payment Agreement.

Date_____

Parent 1_____

Date_____

Parent 2_____



AUTOMATIC TUITION PAYMENT
(via checking account)
OPTIONAL

Dear LVCC Families,

If you would like your tuition payment deducted from your checking account automatically, please complete this form and return it with a voided check attached.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Bank Account Number: _____

Bank Routing Number: _____

Your signature below indicates that you are an authorized agent to make decision on the listed account and you are giving authorization for Linda Vista Children's Center administration to deduct your child/ren's tuition. Should there be insufficient funds available when the scheduled withdrawal occurs, there will be an automatic fee of \$30 (if bank fees exceed \$30 then you will be charged the larger amount). This includes failure to inform administration of the closure of the account. Late fees will be added to the automatic tuition payment. This authorization will be valid for the duration of enrollment of your child/ren, unless otherwise indicated. LVCC reserves the right to revoke this option of payment at the sole discretion of the Executive Director.

Please check the option below to indicate your preference regarding tuition payment.

Full tuition amount withdrawn on the 2nd of the month.

1/2 month tuition withdrawn on the 2nd and the remaining 1/2 month tuition on the 16th

Parent/authorized account holder signature

Date

To cancel this authorization, you must give a minimum of 10 working days' notice in writing.



Parent Handbook Acknowledgement

I/We, the parent(s)/guardian(s) of _____,
have read the **Linda Vista Children's Center Parent Handbook**, and we understand
the policies and operating procedure of the Center. The most current copy of the Parent
Handbook is available at our website: www.lvcckids.org

Signature: _____

Name: _____

Signature: _____

Name: _____

Mass Email Consent

Yes, I would like to be included in Linda Vista Children's Centers mass email. I
understand that by being included, my email address will be shared amongst other
LVCC families.

Email Address 1: _____

Email Address 2: _____

No, I would not like to be included in Linda Vista Children's Center's mass email.
I understand that by not being included, it is my responsibility to check the parent board
in the office and my child's classroom for any information.

Parent's Signature

Date

Please sign and return this insert with your registration forms.



Earthquake Emergency Procedures

Dear LVCC Parents:

Earthquakes up to 8.3 in magnitude are considered possible in the Los Angeles area. In the period immediately following a major earthquake, cross-city travel may be difficult or impossible because of damaged freeway structures, inoperable traffic lights, extreme congestion from the large number of people leaving their workplaces, debris in roadways, fires, broken utility lines, and the general state of confusion that may follow such an event. As a worst-case contingency, Linda Vista Children's Center must plan for the possibility that some parents may not be able to reach the Center to pick up their children for two or three days after the event, and that some injured parents might not be able to reach or contact the Center in the week following the earthquake.

It is very important that you as family discuss your specific situation (distance from workplace to the Center, proximity of relatives or friends to the Center, anticipated difficulty of travel from your work area to the Center, etc.), and develop a plan of action for your family. Things you should consider in more detail in developing such a plan are included below. Your plan should be flexible enough to deal with as many contingencies as possible.

LVCC's earthquake response plans will be put into operation immediately following a major earthquake. The Center grounds will be secure, first aid will be initiated for injured children, and distribution of emergency supplies will begin. The emergency operation will continue at the Center until all children have been picked up, to a maximum of 72 hours after the event. After three days, all children remaining at the center will be relocated to a Red Cross emergency center until the parents or relatives can be located. At least two LVCC staff members will remain with the children until all have been picked up, placed according to parents' instructions, or secured with the Red Cross evacuation center closest to LVCC.

After agreeing on an emergency plan for your family, fill out the ***LVCC Earthquake/Emergency Release Form***. This child release instruction form ***MUST BE COMPLETED AND RETURNED ON YOUR CHILD'S FIRST DAY OF SCHOOL***.

DEVELOPING A FAMILY PLAN OF ACTION FOR A MAJOR EARTHQUAKE

It is possible that family members may be separated when a major earthquake occurs. The children may be at different schools or activities, and the parents may be at different job locations separated by some distance from each other and from the children. Because of...

- Damaged freeway structures and inoperable traffic lights
- Extreme congestion from the large number of people leaving their workplaces
- Debris in the roadways or broken utility lines
- Fires
- And the general state of confusion that may follow a major earthquake, travel across the city may be difficult or impossible for several days. Telephone communication may also be impossible initially.

Parents should determine

- Whether they will attempt to meet each other at a selected location:

- Make their individual ways to school or home;
- Wait at their offices or job sites until travel is possible;
- Or attempt some other course of action.
 - Routes of travel should be selected, bearing in mind that if there is gridlock or damage to one's automobile, it may be necessary to travel by foot. The emergency kit you keep at work or in your car should include a pair of shoes you could use for such a trip.
- Travel to one's home or school could take a day or two on foot. You should discuss
 - Whether you would prefer for your child to remain at LVCC if this occurs;
 - Or if you would prefer to have a relative, a neighbor, or another LVCC parent take your child home, either after contact from you or without waiting for such contact.
- In developing your plan, you should consider as many contingencies as possible, such as
 - One or both parents being out of the office at meetings when the earthquake occurs.
- Since no plan could cover every possible contingency in detail, your plan should be flexible enough to allow for the many unpredictable circumstances that occur. Your plan should include
 - An out-of-state contact, since telephone communication is often easier to out-of-state locations following an emergency.

At LVCC we maintain stored supplies of potable water and other emergency items to help us during an emergency, but we need to move ahead in our preparedness. Toward that end, we ask each family to provide the following emergency pack for each of their children, which must be brought to the Center on their child's first day of school. We will provide you with a re-usable plastic bag in which you can fill with your child's emergency supplies.

Earthquake Survival Supplies

1. Your Health & Safety fee pays for:
 - Common earthquake supplies, i.e. first aid, tools, miscellaneous supplies, and extra food.
 - CPR/First Aid training for staff

2. An additional individualized earthquake kit:

(Must be packed by parents in the two-gallon zip-lock bag provided)

- Extra set of warm clothes, socks, underwear, and a knit hat
- Folded large heavyweight trash bag for use in rain
- Pacifier or other comfort item, as appropriate
- A 72-hour supply of any daily medication, clearly labeled as to indications and dosage
- A picture of your family with a note from you. You may want to tell your child not to worry, to listen to the teachers, to know you'll be there as soon as you can.

Additional items for the Infant Room Only

- 2 bottles with Powder Formula

****Diapers and wipes will be available for children who are not potty-trained.**

LVCC EARTHQUAKE / EMERGENCY RELEASE FORM

Child's Name: _____

Check Desired Action:

My child may be released immediately to any person on this list showing proper identification and indicating a willingness to accept my child.

My child may only be released to his/her parents for the first three days. After the third day he/she will be released to any person on this list showing proper identification and indicating a willingness to accept my child.

Name: _____

Address: _____

Phone Number(s): _____

Name: _____

Address: _____

Phone Number(s): _____

Name: _____

Address: _____

Phone Number(s): _____

OUT OF STATE CONTACT:

Name: _____

Address: _____

Phone Number(s): _____

Relationship to Child: _____

I have indicated my preference between the options listed for dismissal of children from Linda Vista Children's Center following a major earthquake and activation of the Center's emergency procedures plan. I have discussed with each person on the list our family's emergency plan for an earthquake, the procedures indicated above for pick-up of our child, and procedures for establishing communication following an earthquake. After 72 hours, I understand that my child will be taken to the closest Red Cross Emergency Center.

****Both parents/guardians should sign**

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date



Consent Form for Linda Vista Children's Center

Child's Name _____

Field trip Consent

My child may participate in excursions which are planned as part of the program of Linda Vista Children's Center. These trips are walking trips within the neighborhood and are supervised by the center staff.

_____ Initials

Pre K Cheetah Only:

My Child may participate in excursions, planned as part of the program of Linda Vista Children's Center. These trips are walking trips or trips in parent's cars using car seats. These trips are supervised by the center staff. Parents will also join us on some of the field trips. One week's notice will be given on all field trips.

_____ Initials

Picture Consent

I, the undersigned parent, do hereby consent to have my child photographed for school functions only, and I also give my consent to have these pictures, or any reproductions thereof, used by the center for my child's portfolio, LVCC website, class Newsletters (also posted on website), or marketing purposes.

_____ Initials

Sunscreen Consent

I give permission for the staff to reapply sunscreen or sun block on exposed skin as needed in the afternoons. I understand that I must apply sunscreen or sun block before my child arrives at the center. I will provide the original manufactured bottle labeled with my child's full name.

_____ Initials

Diaper Cream Consent

I give permission for the staff to apply over the counter diaper cream as needed. I will provide the original manufactured bottle labeled with my child's full name. **(Prescription creams will require a separate medication form to be completed.)**

_____ Initials

Parent's Signature _____

Date _____

requires daily medication

Linda Vista Children's Center
1259 Linda Vista Ave.
Pasadena, CA 91103
(626) 449-0985

Teacher's Information Sheet
PRESCHOOL FORM

Child's Name: _____ Birth Date: _____

• Parent / Guardian's Relationship
Name: _____ to child: _____
Occupation: _____ Employment: _____
Contact Number: _____ Email Address: _____

• Parent / Guardian's Relationship
Name: _____ to child: _____
Occupation: _____ Employment: _____
Contact Number: _____ Email Address: _____

Are both parents living in home? Yes No

• Other adults in home: Relationship to child

• Other children in home: Relationship to child

ALLERGIES:

Favorite activities:

Fears or special concerns:

Previous play group experiences and/or child care experiences?

Why did you choose Linda Vista Children's Center?