

Child's Name: _____

Class: _____

**IMAGINATION CHILDCARE ACADEMY ENROLLMENT AGREEMENT
2026 SUMMER PROGRAM
JUNE 29, 2026-SEPTEMBER 4, 2026**

TUITION AND FEES

INITIAL

Deposit:

I understand that a non-refundable deposit which includes a registration fee of \$50 and the last week's tuition shall be paid in advance to hold my child's spot.

Tuition:

The current pro-rated tuition is _____ per week for the program that I have chosen.

Program:	Monday	Tuesday	Wednesday	Thursday	Friday
School-Age Half Day					
School-Age Full Day					
Preschool Full Day					
Preschool Half Day					

Payment of Tuition:

- I understand that tuition is due and payable on the Friday before the up-and-coming week.
- I understand that Imagination Childcare Academy does not provide tuition refunds for absences due to illness or any other reason, given that the centers' operating expenses remain constant.
- **I understand that tuition is prorated for the summer, and I am contracted for the same days each week. I understand that I will be required to pay for those days regardless of my child's attendance and or the center being open.**
- I understand that once I submit the summer camp form, I will not be allowed to make changes, as we make our staffing plans based on these forms.

Late or unpaid Tuition:

If payment in full is not received when due, I agree to pay a late payment of \$10 per day, per invoice. All late fees are subject to change with reasonable notice. I understand that if my tuition is delinquent for more than one week, I may be asked to withdraw my child until my account is made current. The center cannot guarantee a child's spot will be held when a child is withdrawn due to non-payment of tuition. Any tuition fees may be sent to a third-party collection agency.

Agency Reimbursement:

I understand that I am solely responsible for any tuition payment and late fees in excess of any agency or third-party reimbursement in accordance with the applicable contract. I also understand that I am solely responsible for promptly communicating any changes in my status that would affect my agency reimbursement, and that I am solely responsible for payment of any tuition in excess of any agency or third-party reimbursement resulting from my failure to promptly communicate status changes. I understand that once I and the center have agreed to my weekly tuition payment, I am solely responsible for payment of that tuition, regardless of my child's attendance.

Charges and Procedure for Late Pick-Up:

The center is open from 7AM to 6 PM, Monday through Friday all year, except for holidays and/or professional development days. I understand that if I fail to pick up my child by the scheduled closing time, I will be expected to pay a late fee of **\$10 PER CHILD FOR EVERY 10 MINUTES AFTER 6PM.** If my child is scheduled for the half-day program, I will be expected to pay a late fee of **\$10 PER CHILD FOR EVERY 10 MINUTES AFTER 1PM.**

DAILY PROCEDURES		INITIAL
Daily Sign In and Sign Out: I understand that I am required to enter the center to drop off and pick up my child and that I must escort my child to and from the designated classroom and staff member each day.		
Interviewing Children and Record Inspection: I understand that the state child care regulatory enforcement and administration agency and the local department of social services or child protective services has the authority to interview children or staff, to inspect and audit child or facility records, to interview children privately, to observe the physical condition of the children in the center, to make provisions for the independent medical examination by a licensed physician of any child, and to contact and instruct any other appropriate authority to do the same, without prior notice or consent by myself or by the center.		
Withdrawal from Program: <ul style="list-style-type: none"> • If I choose to withdraw my child from the summer program, I understand that I must provide <u>at least a two week's notice before summer camp begins</u> in order to cancel the contract. • If I choose to withdraw my child from the summer program, I also understand that the deposit, which includes the last week's tuition and the \$50 registration fee are non-refundable. • After July 1st, if I choose to withdraw my child from the program, I understand that contracted tuition rates will continue to apply through the end of this negotiated contract, regardless of my child's attendance, as this is only a nine week contract. <u>The two weeks' notice will not apply!</u> 		
HOLIDAYS, ABSENCES, AND CLOSINGS		
Holidays: I understand that the center is closed on the following days: July 3rd, September 3rd and 4th (for Professional Development). I agree that I will pay full tuition for these days as operating expenses remain the same.		
Absences/Vacations: I agree to inform the center immediately if my child will be absent on any day. I understand that no allowances, credits, refunds, or make-up days shall be made for absences (i.e. sickness).		
Emergency Closing and Inclement Weather Information: I understand that it is the center's intention to open and provide childcare services every weekday of the year, excluding holidays and professional development days, but in case of inclement weather/natural disaster, I agree that in the event that the center is closed for an extended period of time, I will continue to be responsible for my full tuition payments for two weeks and half tuition payments for two weeks thereafter.		
STATE LICENSING AND OUR POLICIES		
All Policies and state Regulations: I understand that the above policies are not an all-inclusive list of policies, and that my child, my family members, authorized agents and I are bound by State Childcare Regulations, the Parent Handbook, and all other company policies, which may be modified at any time, without notice.		
Parent Handbook: I have read the Parent Handbook located at www.imaginationchildcareacademy.org and understand its contents and policies and agree to be bound by same.		
By signing this contract, I/We hereby agree to: <ol style="list-style-type: none"> 1. Enroll our child at IMAGINATION CHILDCARE ACADEMY, INC. for the summer program which runs from June 29, 2026 through September 4, 2026. 2. Upon acceptance, complete, sign and return all required forms before the first day of care. 3. Upon acceptance, pay the following deposit which is <u>non-refundable</u> if the child is not brought for care. <ul style="list-style-type: none"> ➤ A registration fee of \$50.00 ➤ The last week's tuition _____ 		
Parent/Guardian Signature: _____		Date: _____