



*SR Rise and Shine Child Care Center*  
Lic#493009935

**Attendance & Tuition Contract**

Parent(s) Name:	CDL#	SS#
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Address:	Phone:	Email:

CHILD NAME	BIRTHDATE	TUITION	ATTENDANCE
1)			
2)			
3)			
Application Fee:	Date Paid:	Enrollment Fee:	Date Paid:

- A) I/We have read and agree to abide by all the policy and procedure as set forth in Handbook.
- B) I/We agree to pay SR Rise and Shine Child Care Center tuition in full as agreed upon. Tuition is to be paid in full regardless of days in attendance.
- C) I/We agree to pay for additional and/or miscellaneous charges if a bill is received for such charges. (i.e. overtime, extra days, etc.)
- D) Punctuality is important for drop-off as well as pick-up. Please notify this facility by 8:00 a.m. if child(ren) will be late or absent.
- E) Termination of this contract requires a 30 day notice, at which time pre-paid deposit will be applied to final tuition payment. **NO EXCEPTIONS!**
- F) Fees are non-refundable.
- G) Immunizations are to be kept current and on file.
- H) Sick children are to be kept home.

Additional Notes:	
Parent Signature:	Date:
Parent Signature	Date:
Admitting Staff	Date: