



Enrollment Checklist/Agreement

*** Must be turned in prior to starting school***

- ☐ \$50 Enrollment Fee (non-refundable)
- ☐ Child Care Enrollment Form
- ☐ Child Medical Examination Report
- ☐ CACFP Enrollment (Food Program)
- ☐ Income Eligibility Form (Food Program-even if you don't think you will qualify)
- ☐ Infant and Toddler Feeding and Care Plan (0-24m)
- ☐ Signed Parent Handbook (last page)
- ☐ Immunization Record

Does your child have any allergies? _____

Please *initial* the following to indicate your understanding:

- ____ Our hours of operation are M-F 6:30am-5:30pm. Students must be *picked up BEFORE 5:30pm* or late pick-up fees will apply- see parent handbook.
- ____ Students must be dropped off by 9:00am each day.
- ____ Students in attendance *more than 9.5 hours per day* will be billed an additional \$5/day fee.
- ____ Tuition will be billed the Friday before and payment is *due Monday by the end of the day* to avoid late fees.
- ____ I have read and understand the billing & invoice policy. ➡



Subsidy (State Child Care Assistance)- if applicable:

- ___ I understand I will be billed an estimated copay on the first of each month and that I am responsible for my sliding fee, plus the difference between what state reimburses and what LLSC's daily tuition is. The following month, after reimbursement is received by LLSC and reconciliation has been completed, I may receive a shortfall invoice based on attendance.
- ___ I understand that in order for LLSC to be reimbursed the full amount by the state, my child must attend 5+ hours per day and *not miss more than 5 days per month. Anything that is not reimbursed by the state will be my responsibility.*
- ___ I understand that in order to not receive a late fee, *I must make a payment each week and my balance must be paid in full by the end of the month of care.*

I read and understand the very important information noted above.

Signature of parent/guardian:

Date: