

Kay Waters
Summer Child Care Manager
205.317.6397

Trussville City Schools
Community Education Summer Child Care
TUITION CONTRACT

Summer 2008
Paine Intermediate School
Program Supervisor: 205.228.3032

This agreement is made on _____ (Date) between the Trussville City Schools Community Education Summer Child Care Program and the Parent/Guardian, _____, with custody of _____ who reside at the following address:

Address _____ City _____ Zip _____

Home Phone _____ Cell Phone _____ Work Phone _____

1. I enroll my child(ren) in the Paine Summer Child Care Program.
2. I agree to pay for this service **in advance** on a weekly or every two weeks basis.
3. I agree to pay a \$5 per day late fee if my tuition is not received on time.
4. I agree to pay a non-refundable registration fee of \$35/family for my child(ren) enrolled in the program. I understand that the registration fee is due each spring at the time of registration and my child is not considered enrolled until the fee is received.
5. I do not expect the Summer Child Care Program to provide medical insurance for my child(ren) nor will I hold the Summer Child Care Program, agents or staff liable for injuries which may occur in the normal provision of child care. I will provide my own medical insurance.
6. I understand and accept that my child(ren) may be dropped from the program if he/she cannot follow the rules or becomes a risk to himself/herself, other children and/or staff. I also understand that my child(ren) may be dropped from the program if I am chronically late picking them up (no later than 6:00 p.m.)
7. I have read the attached policies and rules. **I do not have an outstanding balance with or owe any fees to Trussville City Schools.** Until these policies are changed, I accept them as they are and agree to abide by them.

Children enrolled: _____
Name/Grade/Age Name/Grade/Age
_____ Name/Grade/Age
Name/Grade/Age

Please complete information for anyone who may pay the Summer Child Care fees by check (payable to Trussville City Schools).

Name _____ Date of birth _____ SS# _____

Driver's License # _____ State _____

Name _____ Date of birth _____ SS# _____

Driver's License # _____ State _____

Name _____ Date of birth _____ SS# _____

Driver's License # _____ State _____

Parent/Guardian Signature _____ Date _____