



CENTER FOR CHILD DEVELOPMENT Enrollment Agreement

Associate Name _____ Employer _____

Job Title _____ Department _____

Supervisor _____ Supervisor's Phone _____

Please initial each statement that applies.

_____ I understand that a registration fee of \$50 yearly for the first child and \$25 for each sibling will be charged. This fee is non-refundable and will be payroll deducted or be paid in full by the first payroll after your registration appointment.

_____ I understand that the Center for Child Development will not be held responsible for the loss or damage of any of the following items bought from home: jewelry, toys, electronics, children's hearing aids, eyeglasses, other aids or valuables of any kind.

_____ I understand that infants, unless otherwise ordered by a physician are placed on their backs to sleep. After being placed down for sleep on their backs, infants may then be allowed to assume any comfortable sleep position when they can easily turn themselves from the back position.

_____ I hereby give my consent to have my child, _____ photographed, videotaped or interviewed with the intent to increase public knowledge and awareness of education and/or health services.

_____ I acknowledge that I have been given a copy of the Center for Child Development Parent Handbook.

_____ I have signed the tuition payment form and agree that all childcare fees will be payroll deducted or paid two weeks in advance.

_____ I understand that the Center for Child Development does routine developmental assessments of each child in areas of language, gross motor, fine motor, cognitive, and social skills. This will provide us information regarding abilities and will enable us to plan individual instruction for your child.

_____ I understand that the Center for Child Development requires documentation regarding which parent has legal custody in the case of separation or divorce. If there is no legal documentation, then both parents have the right to records and pick-up of their children. It is the responsibility of the custodial parent to provide legal documentation verifying custody arrangements. We require written permission for the non-custodial parent to pick-up a child on a regular basis or for a special occasion.

If an incident occurs that involves my child, I wish to be contacted:

_____ as soon as is feasible _____ when it is time to pick up my child

_____ other (please explain): _____

Signature of Parent/Guardian _____

Date _____