

Emmanuel Lutheran Early Childhood Ministry
917 West Jefferson Boulevard
Fort Wayne, Indiana 46802-4007
(260) 423-1369
emmanuellutheran.org

FINANCIAL AGREEMENT

I wish to enroll _____ at Emmanuel Lutheran Early Childhood Ministry.
(Child's Name)

Please initial all statements below that apply to your child.

I understand that an annual registration fee of \$ _____ per child is due at enrollment and annually. (The registration fee may be reduced if a child enters the program when the school year is partly over.) This registration fee is non-refundable.

Please pick one of the following: I am choosing to pay _____ weekly **OR** _____ monthly.

_____ I agree to pay \$ _____ per _____ for _____
(Week or Month) (Name of Child)

I understand that I am responsible to pay full tuition for the days my child is in attendance. On the first day of my child's attendance, my first tuition payment will be made. Thereafter, tuition payments will be made either on Friday for the week that has just ended or on the first school day of the month.

_____ I understand that if tuition becomes two weeks' delinquent, my child will not be allowed to return to preschool and/or daycare until payments are current.

_____ I understand that Emmanuel-St. Michael Lutheran Elementary School, as well as other Fort Wayne Area Lutheran Schools, will be notified in writing of any delinquent fees owed to our preschool by PreKindergarten families.

_____ I understand that a \$20.00 fee will be charged for returned checks marked "Insufficient Funds." After two occurrences, payment will be expected in cash or money order.

_____ I understand that I am responsible to place any and all payments in the envelopes provided, mark the envelopes with my child's name and the date, and put them in the secure lock box located in the main daycare room (by the preschool/daycare office). I understand that staff members will not do these tasks for me.

_____ I understand that if collection of tuition or lunch fees becomes necessary, parents are liable not only for the delinquent tuition, but also for collection costs, court costs and reasonable attorney fees.

_____ I understand that Emmanuel Lutheran **Preschool** will follow the same calendar as other Fort Wayne Area Lutheran Schools. I understand that Emmanuel Lutheran **Daycare** will be CLOSED for the following holidays, and possibly some of the other days that **Preschool** is closed during their Christmas vacation. You will be notified in advance of these other days.

- | | |
|----------------------------------|---------------------------------|
| New Year's Eve Day (December 31) | Labor Day |
| New Year's Day (January 1) | Thanksgiving Day |
| Good Friday | The Day after Thanksgiving |
| Memorial Day | Christmas Eve Day (December 24) |
| Independence Day (July 4) | Christmas Day (December 25) |

If one of the above days falls on a weekend, daycare will be closed on a weekday for that holiday.

(We will also be closed in the summer one or two days for state-required teacher training and meetings. You will always be notified of these closings.)

(Anytime daycare and/or preschool close on days not mentioned above, you will be notified.)

Emmanuel Lutheran Early Childhood Ministry

Financial Agreement

(Child's Name)

_____ **IF MY CHILD IS AT EMMANUEL FOR LUNCH**, I understand that I am also responsible to pay my child's school lunch and/or milk fee. I understand that an annual \$12.00 (subject to change) fee is required for the privilege of participating in the school lunch program. I understand the school lunch fee is \$2.75 (**subject to change**) per lunch (milk included) and that purchasing a milk for my child to drink with his/her lunch from home is \$.40 (subject to change). I understand that if lunch money becomes two weeks' delinquent, my child cannot receive school lunch or milk until the bill is current.

FOR CHILDREN ATTENDING DAYCARE AND PRESCHOOL

_____ I understand that my child cannot arrive before 7:00 a.m. or be picked up later than 5:30 p.m. I understand that a late fee will be charged for anytime my child is at daycare after 5:30 p.m.

_____ I understand that a late fee of \$5.00 will be charged every 15 minutes when my child is not picked up from daycare by 5:30 p.m. I understand that this fee will be given to the staff member who is caring for my child at the time I am late. I understand that a call will be made to Child Protective Services after one hour if there has been no communication from me with the staff.

FOR CHILDREN ATTENDING PRESCHOOL ONLY

_____ I understand that my child cannot arrive before 8:25 a.m. or be picked up later than 11:05 a.m. (3:05 p.m. for full-day Pre-K students). I understand that I may be charged a daycare fee for anytime my child must be supervised by daycare employees because I bring my child earlier or later than regular preschool hours.

IF I RECEIVE "BRIGHTPOINT" (FOMERLY CANI) / CCDF FUNDS FOR MY CHILD

_____ I understand that I must register my child's attendance **AT EVERY DROP-OFF TIME AND EVERY PICK-UP TIME** so that funds are deposited to Emmanuel's account on a timely basis.

Parent/Legal Guardian Signature _____ Date _____

Parent/Legal Guardian Signature _____ Date _____

Director's Signature _____ Date _____