

KIDS CLUB JOAQUIN MILLER SCHOOL YEAR

Enrollment Agreement

Child's Name: _____

This Agreement is for the 2016-2017 school year, starting in August and ending in June (dates to be announced when OUSD School calendar is available) The Kids Club Joaquin Miller afterschool program offers care for children in Kindergarten through fifth grade, starting from last bell, which is approximately Monday, Tuesday, Thursday, Friday 2:45 p.m. and Wednesday 1:30 p.m until 6:00 p. m. and is operated by the JCC of the East Bay. Morning care beginning at 7:00am until school starts is available and is charged in addition to afternoon care.

I hereby agree to comply with the rules and regulations of the Jewish Community Center of the East Bay regarding fees, attendance, health policies and procedures of Kids Club Joaquin Miller. I understand that the Kids Club Joaquin Miller will give me at least a 30-day advanced notice for any change in my child's/children's schedule, or any change in fees listed in this Agreement. I understand that there are dates when Joaquin Miller Elementary and Kids Club are closed, and a few dates when Joaquin Miller Elementary will be closed and Kids Club is open. My specific payments and childcare schedule are detailed on this Agreement. **I understand that my child cannot attend the Program without the return of this signed Agreement and the state-required licensing forms.**

Tuition:
I understand that this is an annual program that parallels the school year and that I am committing to an annual fee, which for convenience is divided into ten (10) monthly payments. I understand that I must pay one month in advance for services. I agree to pay each of the ten (10) payments no later than the 15th of each month beginning with the first installment due August 15 and the last installment due May 15. I understand that if my payment is not received by the 25th of the month it will be considered late and I will incur a \$25 late fee. Monthly installment amounts will not be adjusted for absences, holidays or Spring/Winter break. I understand that if payment is not received, the Kids Club Joaquin Miller reserves the right to deny attendance and/or terminate my child's enrollment in the program unless other payment arrangements have been made. **I understand that if the responsibility for paying tuition is shared by two parties, each party is responsible for the full amount and that the percentage each party is agreeing to pay in this Agreement is for billing convenience. I understand that if payment is shared, service may be discontinued if either party does not pay their share.**

Note to Parents with Third Party Payers (Bananas, 4C, ect.):
If a third party has agreed to pay part or all of my fee, I understand that I am responsible for any amount not covered by that party.

Schedule Changes:
A Schedule Change Form must be submitted to the Assistant Director of Kids Club Joaquin Miller for approval to request a change to my child's schedule. We require a minimum of 15 days' notice to reduce your schedule. Increasing schedule can take place as soon as approved by the program assistant director. Tuition will be adjusted and pro-rated as appropriate when such changes are made.

Deposit:
To hold a space with this signed Agreement, a \$100 deposit is due. This deposit is **refundable by request** only at the completion of the full school year, assuming all balances have been settled, and your child is not returning the following year.

Early Withdrawal:
A Withdrawal Form must be submitted to the Assistant Director Kids Club Joaquin Miller at least thirty days in advance of withdrawal. By giving thirty days' notice, I will be charged the remaining tuition on a pro-rated basis. **I understand that if I withdraw before the end of the year I will forfeit my deposit.**

Specialty Classes and Additional Programs:
Kids Club Joaquin Miller provides, for an additional fee, vendor-led enrichment classes, drop-in days, and full-day programs when schools are closed (School's Out!), including winter and spring vacation programs. Pre-enrollment is necessary for these special programs through my online account. I understand that activity and other fees may be required to be paid at the time I enroll my child for these programs.

Penalties and Other Fees:
Other fees not specifically mentioned above may be assessed, including drop-ins or for breaches of policy concerning attendance, pick-up, and sign-out procedures. These policies and related penalty amounts will be communicated to parents at the start of the school year, and are subject to change. These fees will be charged directly to your payment method as provided in your online account.

Right of Licensing Agency:
The Department of Licensing Agency has the authority to interview children or staff and to inspect/audit child or facility records without prior consent. The licensee shall make provisions for private interviews with any child or staff member and for the examination of all records related to the operations of the child care center. The Department has the authority to observe the physical condition of the child, including conditions that could indicate abuse, neglect, or inappropriate placement. Your child may not attend the Kids Club Joaquin Miller Program without the return of this signed Agreement. I give permission to Kids Club Joaquin Miller to access my child's health and emergency contact information from my child's school as needed.

Your signature confirms that you have carefully reviewed and agree with this Tuition Commitment Statement.

Signature (Parent or Guardian): _____ Date: _____

Second Parent or Party if payment is shared (if applicable): _____ Date: _____

KIDS CLUB JOAQUIN MILLER SCHOOL YEAR

Enrollment Agreement – Page 2: Payment Form for Payer #1

Directions: Fill in ALL areas & **select a payment method**. Sign and date this page.

Child's Name: [Redacted]

We accept payments by VISA, MasterCard, American Express, Discover, or by Electronic Check (Bank Draft).

We accept payments by check if you prepay for 5 or 10 payments (see below). If two parties are responsible, both must pre-pay.

You will receive a bill at the start of each month as a reminder of your next payment due. Bills are a reminder; you are responsible to make your payment on time even if your bill is not received. When you do receive a bill please take the time to review it for accuracy. Bills show the "Payment Method Selected": Check, Bank Draft, or Credit Card. **Payments may take several days to post to your account. Make sure to record the Bill Amount in your checkbook (as well as to promptly open JCC mailings and e-mail) as the JCC is not responsible for any overdraft charges that you may incur.**

The 10 monthly installment due dates are: Aug. 15, Sep. 15, Oct. 15, Nov. 15, Dec. 15, Jan. 15, Feb. 15, Mar. 15, Apr. 15, May 15. Your payment is due by the 15th; if received after the 25th, **\$25 Late Fee will be added to your bill**. If for some reason your check, bank draft, or credit card payment is declined a \$25 Refused Payment Fee will be added to your bill and you will be contacted at the email address you have provided on Page 1. You will have until the 25th to resolve the matter before a \$25 Late Fee will be added to your bill.

Select Payment Method: If one party is assuming full responsibility for payment, complete Payer #1 as 100%. If two parties are sharing the payment, complete information for Payer #1 and #2, and indicate % each is paying. In a shared payment situation each party is responsible for the whole bill and the child may be suspended if either Payer becomes delinquent; the split billing is merely for your convenience.

Payer's Name: [Redacted]

(Name associated with bank or credit account of financially responsible party)

Email: [Redacted]

Phone: [Redacted]

% of payment to charge: [Redacted] (0% to 100%) Note: Required only if payments are paid by two different parties)

PREPAYMENT CHECK METHOD: Contact the Accounting Dept. at 510-848-0237 x121. **Check only**, due by August 15th 2016. 3% discount for 5 payments at once or 5% discount for all 10 payments. **Prepaid tuition is non-refundable**. If two parties are responsible, this option is only available if both agree to pre-pay. **I understand that I will not get a refund if I change schedule to fewer days of service. I understand that I will get a separate, additional monthly invoice if I choose to add days of service.**

BANK DRAFT METHOD: Must attach a "VOIDED" check. This option works just like a check. Remember to record the amount in your checkbook monthly; the JCC is not responsible for overdraft or bounced check fees. Bank Draft payments are usually run on the 15th of the month but may take several days to show up in your account.

Name of Bank or Financial Institution: [Redacted]

Bank Routing Number: [Redacted]

Checking Account Number: [Redacted]

CREDIT **DEBIT CARD METHOD:** Contact the JCC if your card number or expiration date changes. Card payments are usually run on the 15th of the month however these payments may take several days to post to your account.

Card Number: [Redacted] Expiration Date [Redacted] / [Redacted] / [Redacted]

ENROLLMENT AGREEMENT SIGNATURE

I acknowledge that I have received a copy of this Agreement which includes information about the program and billing procedure, and have provided a signed copy to the Jewish Community Center of the East Bay.

I have given authority to the Jewish Community Center of the East Bay to draw drafts against my checking account or charge my credit card in payment of children services for the amount shown on my monthly bill. I agree that this payment will be made on the 5th of the month prior to service. The JCC East Bay is authorized to charge my card or draft my account for payment until authority is revoked. If payment is not received the JCC reserves the right to deny attendance and/or terminate my child's enrollment in the program unless other payment arrangements have been made.

I agree to pay the monthly tuition based on my child's number of days per week and pick up time, which amounts to: [Redacted]

I also agree to pay the monthly tuition based on my child's number of days and drop-off time for Morning Care, which amounts to: [Redacted]

Signature (Payer #1): [Redacted] Date: [Redacted]

KIDS CLUB JOAQUIN MILLER SCHOOL YEAR

Enrollment Agreement – Page 3: Payment Form for Payer #2

(Required only if payments are paid by two different parties)

Directions: Fill in ALL areas & **select a payment method.** Sign and date this page.

Child's Name: [REDACTED]

We accept payments by VISA, MasterCard, American Express, Discover, or by Electronic Check (Bank Draft).

We accept payments by check if you prepay for 5 or 10 payments (see below). If two parties are responsible, both must pre-pay.

You will receive a bill at the start of each month as a reminder of your next payment due. Bills are a reminder; you are responsible to make your payment on time even if your bill is not received. When you do receive a bill please take the time to review it for accuracy. Bills show the "Payment Method Selected": Check, Bank Draft, or Credit Card. **Payments may take several days to post to your account. Make sure to record the Bill Amount in your checkbook (as well as to promptly open JCC mailings and e-mail) as the JCC is not responsible for any overdraft charges that you may incur.**

The 10 monthly installment due dates are: Aug. 15, Sep. 15, Oct. 15, Nov. 15, Dec. 15, Jan. 15, Feb. 15, Mar. 15, Apr. 15, May 15. Your payment is due by the 15th; if received after the 15th, **\$25 Late Fee will be added to your bill.** If for some reason your check, bank draft, or credit card payment is declined a \$25 Refused Payment Fee will be added to your bill and you will be contacted at the email address you have provided on Page 1. You will have until the 25th to resolve the matter before a \$25 Late Fee will be added to your bill.

Select Payment Method: If one party is assuming full responsibility for payment, complete Payer #1 as 100%.

If two parties are sharing the payment, complete information for Payer #1 and #2, and indicate % each is paying. In a shared payment situation each party is responsible for the whole bill and the child may be suspended if either Payer becomes delinquent; the split billing is merely for your convenience.

Payer's Name: [REDACTED]

(Name associated with bank or credit account of financially responsible party)

Email: [REDACTED]

Phone: [REDACTED]

% of payment to charge: [REDACTED] (0% to 100%) Note: Required only if payments are paid by two different parties)

PREPAYMENT CHECK METHOD: Contact the Accounting Dept. at 510-848-0237 x121. **Check only**, due by August 15th 2016. 3% discount for 5 payments at once or 5% discount for all 10 payments. **Prepaid tuition is non-refundable.** If two parties are responsible, this option is only available if both agree to pre-pay. **I understand that I will not get a refund if I change schedule to fewer days of service. I understand that I will get a separate, additional monthly invoice if I choose to add days of service.**

BANK DRAFT METHOD: Must attach a "VOIDED" check. This option works just like a check. Remember to record the amount in your checkbook monthly; the JCC is not responsible for overdraft or bounced check fees. Bank Draft payments are usually run on the 15th of the month but may take several days to show up in your account.

Name of Bank or Financial Institution: [REDACTED]

Bank Routing Number: [REDACTED]

Checking Account Number: [REDACTED]

CREDIT **DEBIT** **CARD METHOD:** Contact the JCC if your card number or expiration date changes. Card payments are usually run on the 15th of the month however these payments may take several days to post to your account.

Card Number: [REDACTED] Expiration Date [REDACTED] / [REDACTED] / [REDACTED]

ENROLLMENT AGREEMENT SIGNATURE

I acknowledge that I have received a copy of this Agreement which includes information about the program and billing procedure, and have provided a signed copy to the Jewish Community Center of the East Bay.

I have given authority to the Jewish Community Center of the East Bay to draw drafts against my checking account or charge my credit card in payment of children services for the amount shown on my monthly bill. I agree that this payment will be made on the 5th of the month prior to service. The JCC East Bay is authorized to charge my card or draft my account for payment until authority is revoked. If payment is not received the JCC reserves the right to deny attendance and/or terminate my child's enrollment in the program unless other payment arrangements have been made.

I agree to pay the monthly tuition based on my child's number of days per week and pick up time, which amounts to: [REDACTED]

I also agree to pay the monthly tuition based on my child's number of days and drop-off time for Morning Care, which amounts to: [REDACTED]

Signature (Payer #2): [REDACTED] Date: [REDACTED]

KIDS CLUB JOAQUIN MILLER SCHOOL YEAR

Enrollment Agreement – Page 4: Registration and Fees

Directions: Sign and date this page. Your Agreement is now complete. Send this Enrollment Agreement to the Berkeley address.

We recommend that you keep a copy of this Agreement for your records.

- An annual, non-refundable **\$50 Registration Fee per child** is required to hold your child’s space. (Paid with online registration)
- A one-time **\$100 Program Deposit per child** is required to hold your child’s space. This deposit rolls over for children continuing from the previous year’s afterschool program. (Paid with online Agreement)
- A minimum enrollment of 2 days per week is required. Yearly tuition is divided into 10 equal monthly payments, shown below. Payments are due each month by the 15th beginning Aug 15 and ending May 15.

Monthly Installment Payment Plan

Program cost divided into 10 monthly payments for School Year (Due Aug 15- May 15), nine as shown below plus a tenth final payment that is equal to one-half of the monthly amount

Discounts

- 5% sibling discount on each child’s tuition
- 3% or 5% discount on prepayment of 5 or 10 monthly payments respectively, check only
(Prepayments are non-refundable)

Afterschool

| Pick up time | 2 days | 3 days | 4 days | 5 days |
|--------------|--------|--------|--------|--------|
| 4:00pm | \$91 | \$135 | \$180 | \$225 |
| 4:30pm | \$118 | \$178 | \$238 | \$297 |
| 5:30pm | \$176 | \$266 | \$353 | \$441 |
| 6:00pm | \$206 | \$309 | \$411 | \$514 |

Kindergarten AM Care (based on monthly installments of days/per week)

| Drop off time | 1 day | 2 days | 3 days | 4 days | 5 days |
|---------------|-------|--------|--------|--------|--------|
| 7:00am | \$50 | \$102 | \$152 | \$203 | \$253 |
| 7:15am | \$43 | \$87 | \$131 | \$174 | \$217 |
| 7:30am | \$37 | \$73 | \$109 | \$145 | \$181 |
| 7:45am | \$30 | \$59 | \$87 | \$116 | \$145 |
| 8:00am | \$23 | \$43 | \$66 | \$87 | \$109 |

Grades 1-5 AM Care (based on monthly installments of days/per week)

| Drop off time | 1 day | 2 days | 3 days | 4 days | 5 days |
|---------------|-------|--------|--------|--------|--------|
| 7:00am | \$43 | \$87 | \$131 | \$174 | \$217 |
| 7:15am | \$37 | \$73 | \$109 | \$145 | \$181 |
| 7:30am | \$30 | \$59 | \$87 | \$116 | \$145 |
| 7:45am | \$23 | \$43 | \$66 | \$87 | \$109 |
| 8:00am | \$14 | \$30 | \$43 | \$59 | \$73 |

Child’s Name:

Signature (Parent or Guardian – Payer #1): Date:

Second Parent or Party if payment is shared (if applicable – Payer #2): Date: