

**Preschool Agreement for Extended Care**

I am enrolling my child, \_\_\_\_\_ in the extended care program at Ann’s Bright Beginnings Preschool, Ltd., 211 Emerald Road, Paulding, Ohio 45879.

I understand that **extended care rates are payable weekly** unless other arrangements are made and agreed upon by the administrator in advance. Bills will be ready on the last day of the week of extended care attendance. Payment is expected on the last day of the week your child is in attendance.

I understand that any payment **paid after 7 days** from the date owed will be assessed a fee of \$10.00 per week. Any child not current by the end of the following month of extended care will not be permitted to attend the next month.

Any child picked up after 6:00 P.M. will be charged a late fee of \$1.00 per minute with the minimum charge being \$10.00. This policy will be strictly enforced.

I understand that the rates for extended care are \$4.50 an hour for 6.75 hours and under (excluding one preschool session) with a minimum charge of \$4.50. A rate schedule is included in your parent handbook for part time or full time care during one week that would go over 6.75 hours.

Hours my child will be attending extended care:

Monday \_\_\_\_\_  
Tuesday \_\_\_\_\_  
Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_  
Friday \_\_\_\_\_

I indicate by my signature that I understand these policies and I agree to pay this weekly rate and any late fees incurred.

Signature \_\_\_\_\_  
Date \_\_\_\_\_