

Child's Name: \_\_\_\_\_

Rev 8/14

# LOS GATOS ACADEMY PRESCHOOL INC.

**A Non-Profit Corporation**

**License no. 434407962**

**16837 Placer Oaks Rd. Los Gatos, CA 95032**

**PH: 408.242.9342**

## Admission Agreement

Date: \_\_\_\_\_

To the Parents of \_\_\_\_\_:

Congratulations in choosing Los Gatos Academy Preschool (LGAP)! We are very excited to have your child join our LGAP family. At LGAP, we provide your child with a fun and safe environment of creative playtime, personal growth and educational learning. Our mission to you and your family is to develop an individual program for your child, along with your support. Also, help them grow into confident and motivated learners and further solidify the development of their-self as a whole person.

LGAP will serve a nutritious mid-morning and mid-afternoon snack based on the guidelines from the state food program. We also offer an early care snack served only 7-7:30am and an aftercare snack served only at 5pm. The weekly snack menu is posted on the Parent Info Board, as well as near the snack/kitchen area. Please notify the preschool of any allergies and/or dietary needs of your child. Children need to bring their own lunch.

LGAP is open from 7am to 6pm, Monday through Friday. Your child's schedule has been reserved for the following beginning on (date) \_\_\_\_\_.

Half Day     Part-Time Day     Full Day

Monday     Tuesday     Wednesday     Thursday     Friday

Days/Time	8:30am-12:30pm	8:30am-3:30pm	8:30am-6:00pm
2 Days _____	\$500 _____	\$600 _____	\$750 _____
3 Days _____	\$650 _____	\$750 _____	\$925 _____
4 Days _____	\$795 _____	\$895 _____	\$1050 _____
5 Days _____	\$900 _____	\$1005 _____	\$1170 _____

*Morning care is available beginning at 7:00am for an additional \$75 per month.*  Morning care  
**INITIAL** \_\_\_\_\_

All information within this Admission Agreement is provided and required by law and further includes the following:

1. You have three (3) days to review, sign and return this Admission Agreement. An annual **non-refundable** deposit is required to reserve your child's admission. New admission is \$125. Continuing admission is \$100. For continuing admission, the fee is due every year based on the signed date of this agreement. If your child does not start on the agreed upon date, their spot will be held for three (3) days and then forfeited unless discussed with the Director in advance. **INITIAL** \_\_\_\_\_

**For office use only: Registration Fee Paid – Date:** \_\_\_\_\_

2. Your child's monthly tuition fee is \$\_\_\_\_\_ per month and is due on the 25<sup>th</sup> of each month. If the day falls on a weekend or holiday, the tuition is due on the following school day whether your child comes to school that day or not. A grace period is given until the 1<sup>st</sup> of each month to help parents/guardians turn in tuition. A \$50.00 per child late fee will apply on the 2<sup>nd</sup> of the month, with an additional \$10.00 per day up to 30 days, if tuition is not received on time. LGAP reserves the right to withdraw your child, without notice, if tuition is not received 10 days after the due date. *Any checks returned unpaid to LGAP will be subjected to a \$40.00 administrative fee.* After two (2) returned checks, all fees must be paid by a Cashier's check or a money order. **INITIAL** \_\_\_\_\_
3. Parents/Guardians are liable for all costs incurred by LGAP to collect any and all delinquent fees. Fees and policies are subject to change. **INITIAL** \_\_\_\_\_
4. Either parent/guardian is responsible for tuition. Either parent/guardian is liable for any unpaid fees associated with your child's enrollment. Either parent/guardian is responsible for recovery of any unpaid fees either by collections and/or small claims court. **INITIAL** \_\_\_\_\_

Child's Name: \_\_\_\_\_

Rev 8/14

5. A monthly "Pull-up" fee will be applied to each child still in diapers or who are in training until they are fully potty trained. \_\_\_\_\_ 2-3 days – \$60 \_\_\_\_\_ 4-5 days – \$100. Parents/Guardians need to provide diapers and wipes for their child. **INITIAL** \_\_\_\_\_
6. A Materials fee of \$100.00 per child is required. This is a separate and **non-refundable** fee that is payable annually in September. The fee is pro-rated if your child begins attendance during the school year. **INITIAL** \_\_\_\_\_
7. We provide a 10% discount for siblings. For two siblings, the 10% discount is applied to the oldest child's monthly tuition fee. Three or more siblings will have a 10% discount applied to the gross monthly tuition. In addition, we provide a 10% discount to first responders (Fire fighter, Law enforcement, Paramedic), enlisted military, teachers and single parents. Proof of employment, enlistment and custody documentation is required. Discounts cannot be combined. Only one discount per family. **INITIAL** \_\_\_\_\_
8. We love referrals! A tuition credit of \$400 for full time and \$200 for half/part time families will be given for each referral over the course of 6 months. The referred family(ies) must remain with the school for a minimum of 90 days in order for you to receive credit. *Example: \$400/6=\$66.67 per month credit for full time; \$200/6=\$33.34 per month credit for half/part time.* **INITIAL** \_\_\_\_\_
9. We must receive a **paid 30-day written notice** in order to terminate this Admission Agreement. Failure to provide a **paid 30-day written notice** and/or appropriate final payments will result in your account being sent to collections and/or small claims court. You will continue to be responsible for any additional late fees, any court and/or collection/processing fees. Any schedule changes made by you to your child's attendance schedule also requires a **30 day written notice**, with new tuition payment due once the schedule change has begun. **INITIAL** \_\_\_\_\_
10. Late fee(s) will be assessed if your child is not picked up on time. Our half day program ends at 12:30pm, part time at 3:30pm, and full time at 6pm. If your child is not picked up on time, a \$10 fee will be assessed for the first 5 minutes, with a \$1 per additional minute thereafter. Please adhere to your child's pick up time in order to avoid any additional late fee(s). **INITIAL** \_\_\_\_\_
11. The person(s) authorized to sign the child in and out will print full name, sign with a complete signature and record the time of day each and every time the child is dropped off or picked up from LGAP. This includes if the child is removed from LGAP during the day and returns the same day. **INITIAL** \_\_\_\_\_
- Department of Social Services – Community Care Licensing has strict guidelines regarding signing in/out of your child(ren) at drop off and at any pick up time from the center. The sign in/out forms used to track compliance are legal documents and can be audited by the licensing agency at any time. Failure to follow the in and out signature process each day will result in fines beign levied upon the center. Therefore, a \$10.00 per missing signature fee will be assessed as needed. This fee is due an payable with the next monthly tuition payment. **INITIAL** \_\_\_\_\_
12. A 30-day prior written notice will be provided by LGAP before any rate or fee change is made to existing contracts. **INITIAL** \_\_\_\_\_
13. I have included a separate list of any and all allergies, including food allergies, as well as a separate list of any dietary needs for my child. This will be posted in the eating area(s) and the kitchen/food prep area.  
 **My child has no allergies or dietary needs.** Please check box and **INITIAL** \_\_\_\_\_
14. Health and Safety Codes 1596.852 and 1596.853 give the Department of Health and Safety and any duly authorized officer, employee or agent, upon presentation of proper identification, the right to enter and inspect the facility at any time, with or without advance notice, in order to secure regulation(s) compliance. Any person may request an inspection of any child-care facility in accordance with the California Child Day Care Facilities Act by transmitting to the Department of Health and Safety notice of any alleged violations, Code 101200b1. The Department of Health and Safety has the authority, at any time, to interview children and staff, and to inspect and audit child and child-care center records at any time without prior consent. **INITIAL** \_\_\_\_\_
15. Grounds for child's dismissal may occur in the following situations:  
a. LGAP does not receive the tuition payment within five (5) days after the due date.  
b. If the teacher and/or Director feel that the school's program no longer appropriately meets the needs of the child.  
c. If, after following the procedures as listed in "Positive Behavior Management" in the Parent Handbook, the child's behavior escalates or continues to be inappropriate, disruptive and/or dangerous to him/herself and/or others. **INITIAL** \_\_\_\_\_
16. No outside consultation is available at this time. No additional services are provided at this time. **INITIAL** \_\_\_\_\_
17. LGAP does not make any adjustments to tuition fees due to holidays, in-service days, or vacation days that are taken/observed by the school, staff, and/or families that we serve. **INITIAL** \_\_\_\_\_

**Please see the following page for completion of the Admission Agreement.**

Child's Name: \_\_\_\_\_

18. A new Admission Agreement is to be completed annually based on your child's attendance. Other administrative forms may also need to be completed at that time. **INITIAL** \_\_\_\_\_

**We are very excited to welcome you and your child to Los Gatos Academy Preschool!**

Mother's Name: \_\_\_\_\_

SS#: \_\_\_\_\_

DL#: \_\_\_\_\_ (please have available to be copied for our records)

Best Contact Ph #: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Father's Name: \_\_\_\_\_

SS#: \_\_\_\_\_

DL#: \_\_\_\_\_ (please have available to be copied for our records)

Best Contact Ph #: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Who is responsible for payment? (Circle one) Mother Father Both Other: \_\_\_\_\_

I have read and agree to adhere to the above stated policies and have read the Los Gatos Academy Parent Handbook online, [http://www.losgatosacademypreschool.org/parent\\_handbook](http://www.losgatosacademypreschool.org/parent_handbook). In addition, I understand that the policies and fees may be changed at any time during the school year after a 30 day notice has been provided. I will review all notices posted and in newsletters regarding school policies. **INITIAL** \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Name (print full name) Parent/Guardian Signature Date

\_\_\_\_\_  
Parent/Guardian Name (print full name) Parent/Guardian Signature Date

**Jennifer P. M. Smolyanitsky**  
\_\_\_\_\_  
Operating Director Director Signature Date